


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # N30692
 1. Entity Name
NEW MOUNT OLIVE PRIMITIVE BAPTIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.



Principal Place of Business Mailing Address
3001 18TH AVENUE SOUTH **3001 18TH AVENUE SOUTH**
ST. PETERSBURG, FL 33712 **ST. PETERSBURG, FL 33712**

DO NOT WRITE IN THIS SPACE



04022006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2930117	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CAMERON, OTIS
1100 26 AVE S
SAINT PETERSBURG, FL 33705

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is **\$61.25** Due by **May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

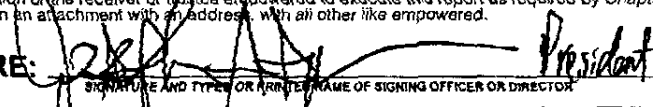
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, JANIE 620 38TH STREET SO. ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORGAN, JULIA 1930 BARCELONA WAY S. ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBINSON, ODELL 5573 HIGHLAND S. SAINT PETERSBURG, FL 33705
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOWNIE, WILHELMINA 2155 22ND AVENUE SOUTH ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, JAMES 2342 7TH AVE S ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SYKES, JOSEPH A 1760 DAYTON ST S ST. PETERSBURG, FL 33712

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00000508361
 04/27/06-80099-023 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 517, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **President** Date: **4-5-06** Ongoing Phone #: **727-327-9904**