

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# N30692

Entity Name: NEW MOUNT OLIVE PRIMITIVE BAPTIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.

Current Principal Place of Business:

3001 18TH AVENUE SOUTH
ST. PETERSBURG, FL 33712

New Principal Place of Business:

3001 18TH AVENUE SOUTH
ST. PETERSBURG, FL 33712 US

Current Mailing Address:

3001 18TH AVENUE SOUTH
ST. PETERSBURG, FL 33712

New Mailing Address:

3001 18TH AVENUE SOUTH
ST PETERSBURG, FL 33712 US

FEI Number: 59-2930117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ODELL
5573 HIGHLAND ST. S
SAINT PETERSBURG, FL 33705 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WILLIAMS, JANIE,
Address: 620 38TH STREET SO.
City-St-Zip: ST. PETERSBURG, FL

Title: T () Delete
Name: DIXON, REGINA
Address: 3911 MIRAMAR WAY S
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: C () Delete
Name: ROBINSON, ODELL
Address: 5573 HIGHLAND ST. S.
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: C () Delete
Name: ALEXANDER, EFFIE
Address: 2626 QUEEN ST S
City-St-Zip: SAINT PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: WILLIAMS, JANIE H.,
Address: 620 38TH ST S
City-St-Zip: ST. PETERSBURG, FL 33711 US

Title: T (X) Change () Addition
Name: NEWKIRK, SANDRA
Address: 3750 5TH AVE S
City-St-Zip: SAINT PETERSBURG, FL 33711 US

Title: C (X) Change () Addition
Name: ROBINSON, ODELL
Address: 5573 HIGHLAND ST. S.
City-St-Zip: SAINT PETERSBURG, FL 33705 US

Title: C (X) Change () Addition
Name: KIDD, CYNTHIA
Address: 6780 28TH ST S
City-St-Zip: SAINT PETERSBURG, FL 33712 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ODELL ROBINSON

C

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date