# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2009**
**Secretary of State**

DOCUMENT# N35406

**Entity Name:** SOUTHSIDE CHURCH OF CHRIST, INC. OF ST. PETERSBURG

**Current Principal Place of Business:**

SOUTHSIDE CHURCH OF CHRIST
1942 49TH ST SOUTH
ST. PETERSBURG, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

JOHNNY L. DANIELS SR.
4129 9TH AVE SOUTH
ST. PETERSBURG, FL 33711 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DANIELS, JOHNNY L. SR.
4129 9TH AVENUE SOUTH
ST. PETERSBURG, FL 33711 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: | CD | ( ) Delete |
| Name: | DANIELS, JOHNNY L SR | |
| Address: | 4129 9TH AVENUE SOUTH | |
| City-St-Zip: | ST. PETERSBURG, FL 33711 | |
| Title: | VCD | ( ) Delete |
| Name: | DANIELS, MINNIE L | |
| Address: | 4129 9TH AVE SOUTH | |
| City-St-Zip: | ST. PERTERSBURG, FL 33711 | |
| Title: | D | ( ) Delete |
| Name: | GRANT, EDWARD SR | |
| Address: | 6248 20TH WAY SOUTH | |
| City-St-Zip: | ST, PETERSBURG, FL 33712 | |
| Title: | D | ( ) Delete |
| Name: | SNELLING, REGINALD SR | |
| Address: | 4290 PORPOISE DR SE | |
| City-St-Zip: | ST PETERSBURG, FL 33705 | |
| Title: | D | ( ) Delete |
| Name: | WATSON, NORRIS J | |
| Address: | 600 40TH ST. N., APT 313 | |
| City-St-Zip: | SAINT PETERSBURG, FL 33713 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |

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: JOHNNY L DANIELS SR CD 04/29/2009
Electronic Signature of Signing Officer or Director — Date