2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Feb 21, 2005 08:00 AM DOCUMENT # N46380 **Secretary of State** Entity Name COLLINS TEMPLE AME CHURCH, INC. Principal Place of Business ... Mailing Address 3620 18TH AVE S P.O. BOX 530095 ST PETERSBURG, FL 33735 ST. PETERSBURG, FL 33747 US 01262005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-6565713 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARTHELL, EDWARD J DO NOT WRITE 2006 KIOWA LN VALRICO, FL 33594_ IN THIS SPACE 3. 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. 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2005 OFFICERS AND DIRECTORS 10. TITLE STD NAME **BRACY MARGARET** STREET ADDRESS 2320-23RD AVE. SOUTH City-ST-7IP ST. PETERSBURG, FL 33712 U00000238324 02/21/05-80095-003 70.00 TITLE NAME BARTHELL, EDWARD J REV STREET ADDRESS 2006 KIOWA LN CITY-ST-ZIP VALRICO, FL 33559 TITI F STD FLOWERS QUEEN STREET ADDRESS 1934-21ST AVE. SOUTH DO NOT WRITE CITY-ST-ZIP ST. PETERSBURG, FL 33712 IN THIS SPACE TITLE NAME JORDAN, BEVERLY STREET ADDRESS 1647 SCRANTON ST SO CITY-ST-ZIP SAINT PETERSBURG, FL 33711 TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Rev Edward Buttell - Rev Edward 5 Berthell
SIGNATURE AND TYPED OR PRINTED HASE OF SIGNING OFFICER OR DIRECTOR

2-/8-0

FILED