

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/30/94: \$100 (IF DISSOLVED, AMOUNT DUE TO REINSTATE: \$200)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -9 AM 9:14

DOCUMENT # N93000002754 (0)

1. Corporation Name

FIRST CHURCH OF THE BRETHREN OF ST. PETERSBURG,
FLORIDA, INC.

Principal Place of Business

Mailing Address

3651 71ST STREET NORTH
ST. PETERSBURG FL 33710

3651 71ST STREET NORTH
ST. PETERSBURG FL 33710

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

06/14/1993

08/10/1994

4. FEI Number

Applied For

59-6598512

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

FILING FEE IS
\$61.25

8. This corporation has liability for intangible tax under s. 190.002,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAHDERT, GEORGE K
535 CENTRAL AVENUE
ST. PETERSBURG FL 33701

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and this if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME HENIZ, DANIEL
STREET ADDRESS 11711 N. ARMENIA AVE.
CITY - ST - ZIP TAMPA FL 33612

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

Change Addition

Same

TITLE VD
NAME SCHULER, LUCINDA
STREET ADDRESS 13837 76TH AVE. NORTH
CITY - ST - ZIP SEMINOLE FL 34646

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

Change Addition

Same

TITLE T
NAME BINKLEY, JOHN R
STREET ADDRESS 11040 64TH TERRACE N
CITY - ST - ZIP SEMINOLE FL 34642

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

Change Addition

Same

TITLE D/M
NAME BUCKSHORN, DOROTHY
STREET ADDRESS 6514 6TH AVE. N
CITY - ST - ZIP ST. PETERSBURG FL 33710

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

Change Addition

Same

TITLE D/CC
NAME RICHARDS, PEG
STREET ADDRESS 6580 SEMINOLE BLVD. #112
CITY - ST - ZIP SEMINOLE FL 34642

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

Change Addition

Same

TITLE D/P
NAME LERSCH, PHIL
STREET ADDRESS 6301-56TH AVE. N.
CITY - ST - ZIP ST. PETERSBURG FL 33709

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

Change Addition

Same

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Phil Lersch

Date

6/6/95 8:13/881-0709

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR