

2-3-97 B- 1200 -C

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Feb 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000004580 (7)

1. Corporation Name

FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST OF
ST. PETERSBURG, INCORPORATED

Principal Place of Business

Mailing Address

240 4TH ST. NORTH
ST. PETERSBURG FL 33701222 EAST WELBOURNE AVE
WINTER PARK FL 32789-4336
US3. Date Incorporated or Qualified
10/01/19933a. Date of Last Report
03/14/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TUCK, WILLIAM C.
222 EAST WELBOURNE AVE
WINTER PARK FL 32789

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

William C. Tuck

WILLIAM TUCK

1/9/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SOUERS, SANFORD	
STREET ADDRESS	431 UNIVERSITY BOULEVARD	
CITY-ST-ZIP	JACKSONVILLE FL	

1.1 TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WILLIAM RING	
1.3 STREET ADDRESS	2501 N. E. 30TH STREET	
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33306	

TITLE	T	<input type="checkbox"/> DELETE
NAME	ROMIG, LARRY G	
STREET ADDRESS	6029 18TH AVENUE NORTH	
CITY-ST-ZIP	ST PETERSBURG FL	

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

TITLE	X/D	<input type="checkbox"/> DELETE
NAME	MILLER, ARNOLD	
STREET ADDRESS	7082 N.W. 3RD AVENUE	
CITY-ST-ZIP	BOCA RATON FL	

3.1 TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

TITLE	SD	<input type="checkbox"/> DELETE
NAME	ATCHISON, JAMES	
STREET ADDRESS	1980 N SWINTON AVENUE	
CITY-ST-ZIP	DELRAY BEACH FL	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

TITLE	M	<input type="checkbox"/> DELETE
NAME	TUCK, WILLIAM C.	
STREET ADDRESS	222 E. WELBOURNE AVENUE	
CITY-ST-ZIP	WINTER PARK FL	

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

WILLIAM TUCK

William C. Tuck

1/9/97

407/645-5458

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #0012312

CP2E037 (9/96)