2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# N93000004644

Entity Name: UNION MISSIONARY BAPTIST CHURCH, INCORPORATED, OF ST. PETERSBURG, FLORIDA

Current Principal Place of Business:

1100 49TH STREET SOUTH
ST. PETERSBURG, FL US

New Principal Place of Business:

1100 49TH STREET SOUTH
ST. PETERSBURG, FL 33707 US

Current Mailing Address:

1100 49TH ST SOUTH
ST. PETERSBURG, FL 33711 US

New Mailing Address:

1100 49TH ST SOUTH
ST. PETERSBURG, FL 33707 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRIEF, MARION
6900 14TH STR SOUTH
ST PETE., FL 33712 US

Name and Address of New Registered Agent:

GRIEF, MARION
1100 49TH ST SO
ST PETE., FL 33707 US

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: _____ 05/04/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MARION, GRIEF
Address: 6900 14TH STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL

Title: T ( ) Delete
Name: DAVIS, BETTY
Address: 828 16TH AVE SOUTH
City-St-Zip: ST PETE., FL

Title: DS ( ) Delete
Name: SHANNON, RUBY
Address: 2337 AUBURN ST. SO.
City-St-Zip: ST. PETERSBURG, FL 33712

Title: PD ( ) Delete
Name: ALEXANDER, JERRY B SR
Address: 1946 25 ST S
City-St-Zip: ST PETERTSBURG, FL 33712

Title: D ( ) Delete
Name: HOLMES, KATHY
Address: 1532 13 ST S
City-St-Zip: ST PETERSBURG, FL 33707

Title: FS ( ) Delete
Name: JORDAN, IMOGENE R
Address: 1500 62 AVE SO
City-St-Zip: SAINT PETERSBURG, FL 33705

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JERRY B. ALEXANDER SR. PD 05/04/2005
Electronic Signature of Signing Officer or Director — Date