2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
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 33707 US

New Principal Place of Business:

Current Mailing Address:

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

GRIEF, MARION
1100 49TH ST SO
ST PETE., FL 33707 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:	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:	1100 49 ST. SO.	
City-St-Zip:	ST PETERTSBURG, FL 33711	
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 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: JERRY B. ALEXANDER SR PD 03/20/2009

Electronic Signature of Signing Officer or Director — Date