

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000954

FILED
Feb 10, 2009
Secretary of State

Entity Name: TEMPLE OF THE LIVING GOD OF ST. PETERSBURG, INCORPORATED

Current Principal Place of Business:

1950-2ND AVE.,N.
ST.PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

1950-2ND AVE.,N.
ST.PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 59-3560615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUH, CARL A ESQ.
111-2ND AVE, N.E.,#610
ST.PETERSBURG, FL 33701 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: P () Delete
Name: BRAUSE, MARLYN B
Address: 1950 2ND AVE N
City-St-Zip: ST.PETERSBURG, FL 33713

Title: T () Delete
Name: SCHEFF, LOIS
Address: 1950 2ND AVE N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: S () Delete
Name: WARREN, MARILYN
Address: 1950 2ND AVENUE NORTH
City-St-Zip: ST.PETERSBURG, FL 33713

Title: VP () Delete
Name: KRATZ, ELIZABETH H
Address: 1950 2ND AVENUE NORTH
City-St-Zip: ST.PETERSBURG, FL 33713

Title: D () Delete
Name: HEINTZ, LOIS
Address: 1950 2ND AVENUE NORTH
City-St-Zip: ST.PETERSBURG, FL 33713

Title: D () Delete
Name: SIMMONS, JAMES
Address: 1950-2ND AVE.,N.
City-St-Zip: ST.PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: KEARNEY, ILSE
Address: 1950 2ND AVENUE NORTH
City-St-Zip: ST.PETERSBURG, FL 33713

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: LOIS SCHEFF

T

02/10/2009

Electronic Signature of Signing Officer or Director

Date