2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2005
Secretary of State

DOCUMENT# N99000002908

Entity Name: GREATER SAINT PAUL'S MISSIONARY BAPTIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.

Current Principal Place of Business:

532 - 33RD ST., SOUTH
ST. PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

532 - 33RD ST., SOUTH
ST. PETERSBURG, FL 33712

New Mailing Address:

FEI Number: 59-3473468 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

RAINES, MICHAEL
1701 62ND AVENUE S.
ST. PETERSBURG, FL 33712 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: T ( ) Delete
Name: RAINES, MICHAEL T
Address: 1701 62ND AVENUE S.
City-St-Zip: ST PETERSBURG, FL 33712

Title: T ( ) Delete
Name: JENKINS, WILLIE J
Address: 5300 ALHAMBRA WAY S.
City-St-Zip: ST PETERSBURG, FL 33712

Title: T ( ) Delete
Name: JONES, JAMES
Address: 2410 19TH STREET S.
City-St-Zip: ST PETERSBURG, FL 33712

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:

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: MICHAEL T. RAINES TRUS 05/10/2005
Electronic Signature of Signing Officer or Director — Date