2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2019
Secretary of State
0290780749CC

DOCUMENT# 706335

Entity Name: ST. LUKE'S UNITED METHODIST CHURCH OF ST. PETERSBURG, FLORIDA, INC.

Current Principal Place of Business:

4444 FIFTH AVE NORTH
SAINT PETERSBURG, FL 33713-6299

Current Mailing Address:

4444 FIFTH AVE NORTH
SAINT PETERSBURG, FL 33713-6299 US

FEI Number: 59-0675145

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ST. LUKE'S UNITED METHODIST CHURCH
4444 5TH AVE N
ST PETERSBURG, FL 33713 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: KRISTINE HOLTON 05/08/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	T
Name	SNEAD, BARBARA
Address	4701 68TH STREET N APT. 3F
City-State-Zip:	ST. PETERSBURG FL 33709

Title	TRUSTEE
Name	BROWN, TIMON
Address	5101 6TH AVE N
City-State-Zip:	ST. PETERSBURG FL 33710

Title	TRUSTEE
Name	FRYE, LARRY
Address	1226 76TH STREET N
City-State-Zip:	ST. PETERSBURG FL 33710

Title	T
Name	LIEBER, ROBERT
Address	4315 4TH AVE N
City-State-Zip:	ST. PETERSBURG FL 33713

Title	TRUSTEE
Name	SCARFONE, MARK
Address	5029 17TH STREET
City-State-Zip:	ST. PETERSBURG FL 33714

Title	TRUSTEE
Name	BOZEMAN, SANDY
Address	8022 STIMIE AVE N
City-State-Zip:	ST PETERSBURG FL 33710

I hereby 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 all other like empowered.

SIGNATURE: TIMON BROWN TRUSTEE 05/08/2019

Electronic Signature of Signing Officer/Director Detail — Date