


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 734041

1. Entity Name
TRUSTEE CORPORATION OF GREATER ST. PAUL BAPTIST CHURCH OF COCOA, FLORIDA, INC.



Principal Place of Business 213 STONE ST. COCOA, FL 32922	Mailing Address 213 STONE ST. COCOA, FL 32922
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DO NOT WRITE IN THIS SPACE



05082006 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3493508	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WELLS, W O SR.
 213 MAGNOLIA STREET
 COCOA, FL 32922

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WELLS, W. O 213 STONE ST. COCOA, FL 32922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT WHITE, KARL 1227 WINDING MEADOWS RD. ROCKLEDGE, FL 32955
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT RACKSTON, BETTYE 717 AURORA ST. COCOA, FL 32922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FAIN, MARY 1938 OTTERBEIN AVE., #401 COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRAY, JAMES 710 STONE ST. COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLACKMAN, ALVIN 2583 MEADOW LANE COCOA, FL 32922

U00000569587
 07/12/06-80005-003 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *W. O. Wells* 07/06/06 3216367178
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #