


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 02, 2006 08:00 AM
Secretary of State

DOCUMENT # N23027 1. Entity Name TURNER CHAPEL AFRICAN METHODIST EPISCOPAL CHURCH OF PALMETTO, INC.	
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Principal Place of Business 317 11TH STREET W. PALMETTO, FL. 34221	Mailing Address 317 11TH STREET W. PALMETTO, FL. 34221
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DO NOT WRITE IN THIS SPACE



07102006 No Chg-NP CR2E037 (4/06)

4. FEI Number 53-0204696	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PARKER, AVA L 603 N. MARKET STREET JACKSONVILLE, FL 32202
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IN THIS SPACE**

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

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

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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U90000573186
08/02/06-80006-005 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKINLEY, YOUNG 11857 HONEY LOCUST DR. JACKSONVILLE, FL 32223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, PAUL 311 11TH STREET WEST PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEWIS, STEVE 101 11TH AVENUE EAST BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BROWN, GWENDOLYN 502 20TH ST WEST PALMETTO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRADDOCK, GEORGE W 2507 8TH AVENUE EAST PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRADDOCK, FRANKIE L 2507 8TH AVE EAST PALMETTO, FL 34221

**DO NOT WRITE
IN THIS SPACE**

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 817, 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: *Frankie L. Craddock* **7-25-06** **941-729-2967**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #