

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # N96000000229

1. Entity Name
GREATER UNION MISSIONARY BAPTIST CHURCH, INC.



Principal Place of Business

249 NW 9TH AVE
SOUTH BAY, FL

Mailing Address

P O BOX 784
SOUTH BAY, FL 33493



01102007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

REESE, CHARLIE E
12060 ORANGE GROVE BLVD
ROYAL PALM BEACH, FL 33411

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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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LESTER, JAMES
STREET ADDRESS	PO BOX 1456
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	DS
NAME	BROCKMAN, KATHERINE
STREET ADDRESS	1030 MARTIN L. KING BLVD
CITY-ST-ZIP	SOUTH BAY, FL
TITLE	D
NAME	DIXON, OLA M
STREET ADDRESS	160 N.W. 6TH AVE
CITY-ST-ZIP	SOUTH BAY, FL 33493
TITLE	DT
NAME	BROCKMAN, JOHN
STREET ADDRESS	1030 MARTIN L KING BLVD
CITY-ST-ZIP	SOUTH BAY, FL 33493
TITLE	D
NAME	MOORE, PEARLIE M
STREET ADDRESS	P.O. BOX 821
CITY-ST-ZIP	SOUTH BAY, FL 33493
TITLE	DT
NAME	HARTLEY, JOSEPHINE
STREET ADDRESS	440 JIMMIE LOU CT.
CITY-ST-ZIP	SOUTH BAY, FL

U00000596375
01/23/07-80076-021 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Charlie M. Moore - Pearl M. Moore 1/19/07 (561) 261-1094