

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705547

Entity Name: ANCIENT CITY BAPTIST CHURCH OF ST. AUGUSTINE,
FLORIDA**Current Principal Place of Business:**27 SEVILLA ST
ST AUGUSTINE, FL 32084-3550**Current Mailing Address:**27 SEVILLA STREET
SAINT AUGUSTINE, FL 32084-3550 US**FEI Number:** 59-0816427**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETERS, HUGH
27 SEVILLA ST
ST. AUGUSTINE, FL 32084-3550 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:** HUGH PETERS

02/09/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER	Title	CHAIRMAN OF BOARD OF TRUSTEES
Name	PETERS, HUGH	Name	HOWES, RON
Address	27 SEVILLA STREET	Address	27 SEVILLA ST
City-State-Zip:	SAINT AUGUSTINE FL 32084-3550	City-State-Zip:	ST AUGUSTINE FL 32084-3550
Title	PASTOR	Title	CHAIRMAN OF BOARD OF DEACONS
Name	PITTS, FRED O.	Name	JONES, JEFF
Address	27 SEVILLA ST	Address	27 SEVILLA ST
City-State-Zip:	ST AUGUSTINE FL 32084-3550	City-State-Zip:	ST AUGUSTINE FL 32084-3550
Title	CORRESPONDING SECRETARY	Title	OFFICE MANAGER
Name	BURNSWORTH, PALMEIRA	Name	HAMPTON, PATSY L
Address	27 SEVILLA STREET	Address	27 SEVILLA ST
City-State-Zip:	SAINT AUGUSTINE FL 32084-3550	City-State-Zip:	ST AUGUSTINE FL 32084-3550

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: HUGH PETERS

TREASURER

02/09/2021

Electronic Signature of Signing Officer/Director Detail

Date