2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760786

Entity Name: ST. PAUL A M E CHURCH, INC

Current Principal Place of Business:

110 SOUTH LLAKE STREET
LEESBURG, FL 34748

Current Mailing Address:

110 S. LAKE ST.
LEESBURG, FL 34748

FEI Number: 59-2105000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REID, FRANK M. III
101 EAST UNION
SUITE #301
JACKSONVILLE, FL 32202 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: FRANK M REID   02/05/2024

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	P		Title	TRUSTEE
Name	WATSON, BETTYE		Name	BEDFORD, THOMAS
Address	4751 DREXEL AVENUE		Address	408 S JUNE DR.
City-State-Zip:	ORLANDO FL 32808		City-State-Zip:	LEESBURG FL 34748
Title	TRUSTEE		Title	TRUSTEE
Name	BROWN, SHARON		Name	BROWN, SHARON
Address	1416 GRIFFIN ROAD #25		Address	1416 GRIFFIN RD #25
City-State-Zip:	LEESBURG FL 34748		City-State-Zip:	LEESBURG FL 34748
Title	TRUSTEE		Title	TRUSTEE
Name	SOPHIE, HOLLOWAY		Name	BEDFORD, CINDY
Address	1415 HIGH STREET		Address	408 S JUNE DRIVE
City-State-Zip:	LEESBURG FL 34748		City-State-Zip:	LEESBURG FL 34748
Title	TRUSTEE		Title	TRUSTEE
Name	SAN NICOLAS, RITA		Name	CARRILLO, ROBERT
Address	P. O. BOX		Address	16942 SE 81ST CHARLESFORT AVE
City-State-Zip:	FRUITLAND PARK FL 34731		City-State-Zip:	THE VILLAGES FL 32162

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: WATSON, BETTYE   PRESIDENT   02/05/2024

Electronic Signature of Signing Officer/Director Detail   Date