

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000026

Entity Name: NEW GULF COAST MISSIONARY BAPTIST ASSOCIATION, INC.**Current Principal Place of Business:**209 DETROIT AVE.
PANAMA CITY, FL 32401**Current Mailing Address:**P. O. BOX 35741
PANAMA CITY, FL 32412-5741**FEI Number: 59-3175261****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**YOUNG, ALDREDGE L
406 LANDINGS DRIVE
LYNN HAVEN, FL 32444 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title D
Name ALDREDGE, YOUNG REV
Address 406 LANDINGS DRIVE
City-State-Zip: LYNN HAVEN FL 32444Title D
Name WILLIAMS, FLORENCE Y
Address 2903 CEDAR'S CROSSING
City-State-Zip: PANAMA CITY FL 32405Title D
Name MCALISTER, JOSEPH REV
Address 4290 WADDELL MILL LANE
City-State-Zip: MARIANNA FL 32446Title D
Name WILSON, C.L. REV
Address PO BOX 40
City-State-Zip: BRISTOL FL 32321Title D
Name SMITH, ROBERT L
Address 3925 PETERS DR
City-State-Zip: PANAMA CITY FL 32405Title D
Name WRIGHT, SHARON
Address 1501 LOUISIANA AVE
City-State-Zip: LYNN HAVEN FL 32444

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: ALDREDGE L. YOUNG**MODERATOR****04/14/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date