

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000002986

**Entity Name:** NEW ST. JAMES MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

365 NW MARTIN GLN  
LAKE CITY, FL 32055

**Current Mailing Address:**

365 NW MARTIN GLN  
LAKE CITY, FL 32055

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PARNELL, DONAL  
1890 N.W. JAKE GLEN  
LAKE CITY, FL 32055 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 T  
Name PARNELL, DONAL  
Address 1890 N.W. JAKE GLEN  
City-State-Zip: LAKE CITY FL 32055

Title TT  
Name HULAND, HERMAN  
Address 650 NE GIBBS TERRACE  
City-State-Zip: LAKE CITY FL 32055

Title T  
Name ANDERSON, HARRY P  
Address 211 SW BRIAR BROOK  
City-State-Zip: LAKE CITY FL 32024

Title T  
Name ANDERSON, CARLENE  
Address 2058 N.W. HAMP FARMER RD  
City-State-Zip: LAKE CITY FL 32055

Title T  
Name PARNELL, SAMUEL  
Address 1469 NW JAKE GLN  
City-State-Zip: LAKE CITY FL 32055

Title TT  
Name HARRIS , WILLIE J  
Address 618 NW MCCALL TERR  
City-State-Zip: LAKE CITY FL 32055

*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: CARLENE ANDERSON**

**CLERK**

**01/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date