

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000006760

**FILED**  
**Apr 02, 2024**  
**Secretary of State**  
**1573124487CC**

**Entity Name:** NEW OUTREACH BY FAITH PRIMITIVE BAPTIST CHURCH INC.

**Current Principal Place of Business:**

2262 PINE NEEDLES CIR  
PENSACOLA, FL 32514

**Current Mailing Address:**

2262 PINE NEEDLES CIR  
PENSACOLA, FL 32514

**FEI Number:** 93-1733598

**Certificate of Status Desired:** No

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

BASSETT, ANTHONY PASTOR  
2262 PINE NEEDLES CIR  
PENSACOLA, FL 32514 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 P  
Name BASSETT, ANTHONY  
Address 2262 PINE NEEDLES CIR  
City-State-Zip: PENSACOLA FL 32514

Title VP  
Name PARMER, KARL A  
Address 2262 PINE NEEDLES CIR  
City-State-Zip: PENSACOLA FL 32514

Title SEC  
Name BASSETT, KEISHA P  
Address 2262 PINE NEEDLES CIR  
City-State-Zip: PENSACOLA FL 32514

*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:** BASSETT, ANTHONY

**PASTOR**

**04/02/2024**

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

\_\_\_\_\_  
Date