

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49072

Entity Name: THE MOUNT PILGRIM AFRICAN BAPTIST CHURCH, INC.**Current Principal Place of Business:**5103 DR MARTIN LUTHER KING JR DRIVE
MILTON, FL 32570**Current Mailing Address:**P.O. BOX 321
MILTON, FL 32570 US**FEI Number: 59-3042845****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GILMORE, JAMES
6986 DALISA ROAD
MILTON, FL 32583 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	MEMB
Name	JOHNSON, JOE
Address	4021 GARCAN POINT ROAD
City-State-Zip:	MILTON FL 32583

Title	AT
Name	BROUGHTON, TERRAL
Address	5072 DR MARTIN LUTHER KING JR DRIVE
City-State-Zip:	MILTON FL 32570

Title	CLER
Name	MCALLISTER, JACQUELINE
Address	7037 JACOBS VIEW LANE
City-State-Zip:	MILTON FL 32570

Title	CD
Name	FRANKLIN, CLAUDIE
Address	6224 WILLARD NORRIS RD.
City-State-Zip:	MILTON FL 32570

Title	MEMB
Name	ADAMS, JOHN
Address	6914 DALISA RD
City-State-Zip:	MILTON FL 32583

Title	TREASURER
Name	GILMORE, GWEN P
Address	6408 KENNINGTON CIRCLE
City-State-Zip:	MILTON FL 32570

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: GWEN P. GILMORE**TREASURER****01/24/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date