

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

DOCUMENT# N98000002173

**Entity Name:** CHIEF CORNERSTONE MISSIONARY BAPTIST CHURCH, INC.

**FILED**  
**Feb 27, 2020**  
**Secretary of State**  
**9884087071CC**

**Current Principal Place of Business:**

3125 MAIN STREET  
MELBOURNE, FL 32901

**Current Mailing Address:**

3125 MAIN STREET  
MELBOURNE, FL 32901

**FEI Number: 01-0728512**

**Certificate of Status Desired: Yes**

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

WILLIAMS, DUPREE  
4066 MASIRA COURT  
WEST MELBOURNE, FL 32904 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: DUPREE WILLIAMS**

**02/27/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DEACON  
Name EDWARDS, ADONIJAH I  
Address 200 MEDEA AVENUE  
City-State-Zip: PALM BAY FL 32907

Title SECRETARY  
Name HOLLOWAY, ROSE E  
Address 632 LUND CIRCLE  
City-State-Zip: MELBOURNE FL 32901

Title TRUSTEE  
Name RILEY, LARRY D  
Address 1416 MANOR DRIVE NE  
City-State-Zip: PALM BAY FL 32905

Title CO-TRUSTEE  
Name EDWARDS, ESTELLA WADE  
Address 3219 PLUMMER CIRCLE  
City-State-Zip: MELBOURNE FL 32901

Title TREASURER  
Name PRESSLEY, WILLIAM  
Address 805 UNIVERSITY BLVD  
City-State-Zip: MELBOURNE FL 32901

*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: ROSE E. HOLLOWAY**

**SECRETARY**

**02/27/2020**

Electronic Signature of Signing Officer/Director Detail

Date