

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714727

FILED
Aug 02, 2006
Secretary of State

Entity Name: ANTIOCH PRIMITIVE BAPTIST CHURCH, INC.

Current Principal Place of Business:

4124 PAPPY KENNEDY ST.
ORLANDO, FL 328114158

New Principal Place of Business:

Current Mailing Address:

4124 PAPPY KENNEDY ST.
ORLANDO, FL 328114158

New Mailing Address:

FEI Number: 59-2962043 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TYSON, ELDER ALVIN
1103 SHIMMERING SAND DR
OCOE, FL 34761 US

Name and Address of New Registered Agent:

TYSON, ELDER ALVIN
10512 DEMILO PLACE #202
ORLANDO, FL 32836 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: _____

08/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: TYSON, ELDER ALVIN
Address: 2130 SHIMMERING SAN DRIVE
City-St-Zip: OCOEE, FL 34761

Title: S () Delete
Name: WILSON, JOSEPHINE
Address: 4524 KING COLE BLVD
City-St-Zip: ORLANDO, FL 32811

Title: T () Delete
Name: HINSON, CAROLYN
Address: 1117 KOZART ST
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: MONTGOMERY, ELDER VINCENT
Address: 1815 FLORANCE VISTA BLVD.
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: ABRAM, CYNTHIA
Address: 2346 MOUNTAIN SPRING ST
City-St-Zip: OCOEE, FL 34761

Title: D (X) Delete
Name: HINSON, MARK
Address: 4868 CYPRESS WOODS DRIVE
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: TYSON, ELDER ALVIN
Address: 10512 DEMILO PL #202
City-St-Zip: ORLANDO, FL 32836

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HINSON, MARK
Address: 4868 CYPRESS WOODS DR
City-St-Zip: ORLANDO, FL 32826

Title: D (X) Change () Addition
Name: SIMMONS, LARRY
Address: 4967 LUCERNE TERRACE
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELDER ALVIN TYSON

C

08/02/2006

Electronic Signature of Signing Officer or Director

Date