


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 718887</b> 1. Entity Name <b>GREATER ST. PAUL MISSIONARY BAPTIST INSTITUTIONAL CHURCH, INC.</b>	
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Principal Place of Business <b>1130 N WEBSTER AVE LAKELAND, FL 33805-3545</b>	Mailing Address <b>1130 N WEBSTER AVE LAKELAND, FL 33805-3545</b>
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01242006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-1301029</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>SANDERS, DR. N.S. 1130 N WEBSTER AVE. LAKELAND, FL 33805</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submitted this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	<b>1/24/06</b> DATE
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Filing Fee is <b>\$61.25</b> Due by <b>May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DUNN, ANNETTE 608 PONDEROSA DR W LAKELAND, FL 00000	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANDERS, N S 1131 N WEBSTER AVENUE LAKELAND, FL 00000	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STILLS, DALE 2815 HIGHLAND BLVD LAKELAND, FL 33804	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, ANDERSON SR 1128 W 12TH ST LAKELAND, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STANDLEY, JOE 648 WHITEHURST LAKELAND, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

000000402071  
02/02/06-80072-004 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	<b>1/24/06</b> Date	<b>863-683-3642</b> Daytime Phone #
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**SIGNATURE:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR