

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718887

FILED
Apr 30, 2008
Secretary of State

Entity Name: GREATER ST. PAUL MISSIONARY BAPTIST INSTITUTIONAL CHURCH, INC.

Current Principal Place of Business:

1130 N WEBSTER AVE
LAKELAND, FL 338053545

New Principal Place of Business:

Current Mailing Address:

1130 N WEBSTER AVE
LAKELAND, FL 338053545

New Mailing Address:

FEI Number: 59-1301029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, DR. N.S.
1130 N WEBSTER AVE.
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: DUNN, ANNETTE,
Address: 606 PONDEROSA DR W
City-St-Zip: LAKELAND, FL 33810

Title: PD () Delete
Name: SANDERS, N S,
Address: 1131 N WEBSTER AVENUE
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: STILLS, DALE
Address: 2815 HIGHLAND BLVD
City-St-Zip: LAKELAND, FL 33804

Title: D () Delete
Name: WILLIAMS, ANDERSON S, R
Address: 3918 WINCHESTER RD
City-St-Zip: LAKELAND, FL 33811

Title: TD () Delete
Name: STANDLEY, JOE
Address: 646 WHITEHURST
City-St-Zip: LAKELAND, FL 33805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ANNETTE DUNN

SD

04/30/2008

Electronic Signature of Signing Officer or Director

Date