

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727972

FILED  
May 15, 2007  
Secretary of State

Entity Name: MILL CREEK MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

6019 SR 16  
ST. AUGUSTINE, FL 320926807 US

**New Principal Place of Business:**

**Current Mailing Address:**

6019 SR 16  
ST. AUGUSTINE, FL 320926807 US

**New Mailing Address:**

FEI Number: 59-1526486      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:**

BEECHER, DAVID  
9470 C.R. 13 NORTH  
ST. AUGUSTINE, FL 32092 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: P ( ) Delete  
Name: RAMSEY, (DONALD),  
Address: 4070 RICH ROAD  
City-St-Zip: GREEN COVE SPG., FL

Title: FVT ( ) Delete  
Name: BEECHER, DAVID  
Address: 9470 C.R. 13 NORTH  
City-St-Zip: ST. AUGUSTINE, FL

Title: D ( ) Delete  
Name: GRINER, PAUL  
Address: 3950 S.R 206W  
City-St-Zip: ELKTON, FL

Title: D ( ) Delete  
Name: SEVERT, DANNY  
Address: 3455 OLD MOULTRIE RD  
City-St-Zip: ST. AUGUSTINE, FL

Title: S ( ) Delete  
Name: RAMSEY, GLORIA  
Address: 4070 RICH RD.  
City-St-Zip: GREEN COVE SPGS, FL

Title: D ( ) Delete  
Name: SEVERT, GREG  
Address: 3304 COASTAL HWY  
City-St-Zip: ST. AUGUSTINE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: DAVID BEECHER

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

FVT

05/15/2007

\_\_\_\_\_ Date