

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90048 044 \*\*\*\*61.25

**DOCUMENT # 729772**

1. Entity Name

TRUSTEE CORPORATION OF THE HUNTER PARK  
MISSIONARY BAPTIST CHURCH, INC.



Principal Place of Business

4448 EMERSON STREET  
JACKSONVILLE FL 32207-4917

Mailing Address

4448 EMERSON STREET  
JACKSONVILLE FL 32207-4917

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2295599

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOWD, JAMES  
3433 TAYLOR ST  
JACKSONVILLE FL 32207

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME DOWD, JAMES  
STREET ADDRESS 3433 TAYLOR STREET  
CITY-ST-ZIP JAX FL 32207

TITLE T ☐ Delete  
NAME LAMBERT, DALE H  
STREET ADDRESS 3752 CACTUS LANE  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE T ☒ Delete  
NAME LAMBERT, JAMES  
STREET ADDRESS 3752 CACTUS LANE  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE SD ☐ Delete  
NAME DOWD, JOANN  
STREET ADDRESS 3433 TAYLOR ST  
CITY-ST-ZIP JAX FL 32207

TITLE T ☐ Delete  
NAME PEEPLES, JAY  
STREET ADDRESS 3668 CALLA ST  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE T ☐ Delete  
NAME SMITH, HERBERT  
STREET ADDRESS 2241 LEON RD  
CITY-ST-ZIP JACKSONVILLE FL 32246

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME MARK Breedlove  
STREET ADDRESS 2825 Apple Rd  
CITY-ST-ZIP Jacksonville, FL 32246

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE

*[Signature]*

2-16-06 8:00 3017833