

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740256

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Entity Name:** ST. JOHN MISSIONARY BAPTIST CHURCH OF WEST PALM BEACH, INC.

**Current Principal Place of Business:**

2006 A. E. ISAACS AVENUE  
WEST PALM BEACH, FL 33407 PB

**New Principal Place of Business:**

**Current Mailing Address:**

2006 A.E. ISAACS AVENUE  
WEST PALM BEACH, FL 33407 PB

**New Mailing Address:**

**FEI Number:** 59-1665221      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TYSON, JOSEPH B.  
3521 W 35TH STREET  
RIVERIA BCH., FL 33404 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: TC  
Name: WALKER, NORMAN  
Address: 1553 6TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33401 PB

Title: TVC  
Name: BELL, LUTHER  
Address: 521 21ST  
City-St-Zip: WEST PALM BEACH, FL 33407 PB

Title: C  
Name: POWELL, RUTH M.  
Address: 1660 30TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404 PB

Title: TT  
Name: ROSTANT, JOHN  
Address: 1028 6TH ST  
City-St-Zip: RIVIERA BEACH, FL 33404 PB

Title: CT  
Name: HARDNETT, BARBARA  
Address: 350 W. 21ST STREET  
City-St-Zip: RIVIERA BEACH, FL 33404 PB

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH B. TYSON

REV.

03/08/2010

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

\_\_\_\_\_  
Date