

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759264

FILED
Apr 10, 2012
Secretary of State

Entity Name: ST. PAUL MISSIONARY BAPTIST CHURCH OF HOMESTEAD, INC.

Current Principal Place of Business:

344 SW 4TH A VE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

344 SW 4TH A VE
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 65-0197938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES, SIMMONS A
470 N W 15TH ST
FLORIDA CITY, FL 33034 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: PD
Name: SIMMONS, JAMES A
Address: 470 NW 15TH ST..
City-St-Zip: FLORIDA CITY, FL 33034 US

Title: D
Name: LLOYD, FITZGERALDL
Address: 26434 S W 134TH ST
City-St-Zip: HOMESTEAD, FL 33032 US

Title: D
Name: SEALS, MARY
Address: 777 N.E. 11TH ST., #419
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D
Name: TERRY-DAVIS, LORETTA DR.
Address: 25371 SW 122 CT.
City-St-Zip: PRINCETON, FL 330325994

Title: ST
Name: BUTLER, AARON
Address: 1520 NW 19TH ST.
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D
Name: SMITH, LARZETTA
Address: 160 NW 9 TH AV.
City-St-Zip: FLORIDA CITY, FL 33034 US

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: JAMES A SIMMONS

PD

04/10/2012

Electronic Signature of Signing Officer or Director

Date