2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)** 

## Aug 25, 2004 8:00 am Secretary of State **DOCUMENT # 759781** 1. Entity Name 08-25-2004 90006 014 \*\*\*\*75.00 ABYSSINIA MISSIONARY BAPTIST CHURCH MINISTRIES, INC. Mailing Address Principal Place of Business 2360 KINGS ROAD JACKSONVILLE FL 32209 2360 KINGS ROAD JACKSONVILLE FL 32209 24081573 cipal Place of Business MOORE CR2E037 (4/04) Applied For 4. FEI Number 59-2542299 Not Applicable Dountry Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AUSTIN, RONALD ESQ. Street Address (P.O. Box Number is Not Acceptable) 1400 PRESEDENTIAL DR, STE #1 JACKSONVILLE FL 32207 Zip Code 8. The above named entity submits this s ement for the purpose of hanging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered age SIGNATURE (NOTE: Registered Agent signature required when reinstating FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By September 8, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE Change ☐ Addition DIAMOND, TOM E. (REV) 4143 MARKIN DR W. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32211 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HAMILTON, JAMES NAME NAME 2735 BEGONIA RD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32209 CITY-ST-ZIP CITY-SI-ZiP--☐ Defete ☐ Change ☐ Addition TITLE TITLE MORTON, FANNIE L. NAME NAME 3623 BOULEVARD STREET ADDRESS STREET ADDRESS. JACKSONVILLE FL 32209 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE DUNHAM, DAVID 10831 WAHINE DRIVE N STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32216 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition HOLBACK, RALPH NAME NAME 2954 RIBAULT CIR. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32208 CITY-ST-7IP CITY-ST-78P ☐ Delete TITLE TITLE ☐ Change ☐ Addition HAMILTON, LILLIE MAE NAME NAME 2413 HORNE ST STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32209 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

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changed, or on an attachment with an address, with all other like empowered. OR DIRECTOR