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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 764019
1. Corporation Name
ST. JAMES AFRICAN METHODIST EPISCOPAL CHURCH OF EUSTIS, FLORIDA, INC.

Principal Place of Business: 725 EAST McDONALD AVENUE, EUSTIS FL 32726
Mailing Address: 725 EAST McDONALD AVENUE, EUSTIS FL 32726



21	2. Principal Place of Business	2a	2a. Mailing Address	3.	Date Incorporated or Qualified		
	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.		07/02/1982	4.	FEI Number
22	City & State	27	City & State				Applied For
23	Zip	28	Country			59-3246379	Not Applicable
24	Country	29	Country				\$8.75 Additional Fee Required
25	Country	30	Country				\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent
CUMMINGS, FRANK C. BISHOP
AFRICAN METHODIST EPISCOPAL CHURCH
112 WEST ADAMS STREET, SUITE 1814
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PDC	<input type="checkbox"/> DELETE
NAME	REEVES, REV. CLARENCE	
STREET ADDRESS	725 EAST McDONALD AVENUE	
CITY-ST-ZIP	EUSTIS FL	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	BROOMFIELD, KEITH	
STREET ADDRESS	215 W. MILLS STREET	
CITY-ST-ZIP	EUSTIS FL 32726	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	POOLE, RENA D	
STREET ADDRESS	1033 SMITH ST	
CITY-ST-ZIP	EUSTIS FL 32726	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	SWEET, THEOLA F	
STREET ADDRESS	1307 JEAN COURT	
CITY-ST-ZIP	EUSTIS FL 32726	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 of Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rena Sweet* SIGNATURE REQUIRED DC
Date: 1-11-99 Daytime Phone #: 352-35746233

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