

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768876

FILED  
Mar 24, 2012  
Secretary of State

**Entity Name:** MOUNT PILGRIM MISSIONARY BAPTIST ASSOCIATION, INC.

**Current Principal Place of Business:**

3107 EAST LAKE AVE.  
TAMPA, FL 33610 US

**New Principal Place of Business:**

**Current Mailing Address:**

3107 EAST LAKE AVE.  
TAMPA, FL 33610 US

**New Mailing Address:**

**FEI Number:** 59-2351625

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANIELS, HOSES L  
3107 EAST LAKE AVE.  
TAMPA, FL 33610 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: P/D  
Name: DANIELS, HOSES L  
Address: 3107 EAST LAKE AVE  
City-St-Zip: TAMPA, FL 33610

Title: VP/D  
Name: JENKINS, T.W.  
Address: 815 BLUEGRASS LANE  
City-St-Zip: BRANDON, FL 33510

Title: D  
Name: HAYNES, WILLIE J  
Address: 3015 GEM LUSTER CT  
City-St-Zip: VALRICO, FL 33594

Title: T/D  
Name: NORMAN, EDDIE B  
Address: 6211 NORTH 22ND STREET  
City-St-Zip: TAMPA, FL 33610

Title: S/D  
Name: SMITH, EMMA  
Address: 4110 WILLIS ROAD  
City-St-Zip: MUBERRY, FL 33860

Title: D  
Name: BOWERS, WALLACE Z  
Address: 8306 FIR DR.  
City-St-Zip: TAMPA, FL 33619

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: WALLACE Z. BOWERS

D

03/24/2012

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

\_\_\_\_\_  
Date