

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002098

FILED  
Jan 31, 2009  
Secretary of State

**Entity Name:** MOUNT CARMEL MISSIONARY BAPTIST CHURCH OF JUPITER INC.

**Current Principal Place of Business:**

MOUNT CARMEL MISSIONARY  
6823 CHURCH ST.  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

MOUNT CARMEL MISSIONARY  
PO BOX # 1253  
JUPITER, FL 334681253

**New Mailing Address:**

**FEI Number:** 59-2724170

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWTON, CALVIN J  
2300 AVENUE M  
RIVIERA BEACH, 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: PD ( ) Delete  
Name: NEWTON, CALVIN J  
Address: 2300 AVENUE M  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: TD ( ) Delete  
Name: PITTMAN, CHARLES J  
Address: 17276 67TH ST.  
City-St-Zip: JUPITER, FL 33458

Title: SD ( ) Delete  
Name: HINSON, WILLIE F JR  
Address: 7372 BENDROSS RD  
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CALVIN J. NEWTON

DEA

01/31/2009

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

\_\_\_\_\_  
Date