2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: Diversity

				,								
DOCUMENT # N02000004380 1. Entity Name										F= 1 1	Friend State	
PROVIDENCE METROPOLITAN BAPTIST CHURCH, INC.												
Principal Place	e of Business		Maiting Add	Mailing Address					06 9	SEP 15	AH 11: (	)5
401 S MAR	TIN LUTHER	401 S MA	401 S MARTIN LUTHER KING JR BLVD			)		SEC	DETAGN	OF STA	4- see	
DAYTONA	BEACH FL 3	DAYTONA BEACH FL 32114										
2. Principal P	lace of Busines	3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					2nd	MOORE	CR2E0	37 (4/06)		
City & State	e	City & State					4. FEI Number	NO-T APP	LICABLE	- No	oplied For of Applicable	
Žip	Zip Country			Zip Cou			5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	6. Name	and Address of Current	Registered Ag	egistered Agent				7. Name and A	ddress of New I	Registered	Agent	
(0)	-					Name .						
326	HNSON, R SOUTH C YTONA BE	NUE	UE			Street Address (P.O. Box Number is Not Acceptable)						
	,, _, , , , ,										T == =	
<u> </u>						City				Fŧ	Zip Code	<del>2</del>
8. 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. I am familiar with, and accept the obligations of registered agent.												
Obligations	or registered t	agerit.							20799	401	78	
SIGNATURE												
Signature, typed or printed name or registered agent and title if applicable. (NOTE: Registered Agent signature required when registating):  DATE												
												N. M. M.
FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Due By September 6, 2006  Trust Fund Contribution.  \$5.00 May Be Added to Fees Florida Department of												
	STATE OF		L)	Added to 1 des		ua Depa	riment of s	otate				
10.		OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHA	NGES TO OFFICE	RS AND D	RECTORS IN	
TITLE	D ROSSIN, ROSSIE		I	☐ Delete				istee			Change	Addition Addition
NAME STREET ADDRESS	4044 070 040 10 070557			NAM STRI		et address	20	bby Sti	nson	<i>a</i> .		
CITY - ST - ZIP	DAYTONA	BEACH FL 32117				-ST-ZIP		Im coas			3216	,4
TITLE	D		1	☐ Delete TITE			Tru	istee		175	Change	Addition
NAME		MARTHA E		NA .		-	Ant	wann Fo	rdham,			
STREET ADDRESS CITY-ST-ZIP	1	KING STREET BEACH FL 32117				EET ADDRESS   3 8		Underwich	Path	2,		
	D-				+			n coast	+ longa	50	164	
NAME	WHITE, JOI	HNNIE M	,	☐ Delete	NAM		Mic	hael Lo	we		☐ Change	Actorion
STREET ADDRESS	437 ALAMA	ANDA STREET			STRE	E1 ADDRESS	13 6	s South	carorn			,
CITY-ST-ZIP	DAYTONA	BEACH FL 32114			CITY	-ST - ZIP	Pay	tona Bea	ch. Flo	orida	391	14
TITLE	FSD		1	Delete	MIL						☐ Change	☐ Addition
NAME STREET ADDRESS	STINSON, 0				NAM	et address						
CITY-ST-ZIP .		BEACH FL 32117				-ST-ZIP						
TITLE	D			Delete	TITLE			i			☐ Change	☐ Addition
NAME	WILSON, J		·		NAM		Dt	eceased				
STREET ADORESS	DANTONIA DELONIEI COLLA			STREE								
CITY-ST-ZIP	DATIONA	DEAOITTE 32114				-ST-ZHP	ļ					<b></b>
TITLE NAME	1			☐ Delete	TITLI NAM						☐ Change	Addition
STREET ADDRESS						et address						
CITY-ST-ZIP						-S1-ZIP						
12. I hereby o	certify that the	information supplied with	this filing does r	not qualify for t	he exem	ptions con	tained in	Chapter 119, Flori	da Statutes, I furt	her certify t	hat the inform	ation
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												
changed,	or on an attac	hment with an address, w	vith all other like of	mpowered.						n	a /	_