

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 07, 2007 08:00 AM
Secretary of State

DOCUMENT # N03000001529

1. Entity Name

PEACE MISSIONARY BAPTIST CHURCH OF GRETN, INC.



Principal Place of Business

119 MAPLE DR
GRETN FL 32332

Mailing Address

P.O. BOX 97
GRETN FL 32332



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/06)

Zip

Country

Zip

Country

4. FEI Number

59-3520060

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUSH, REV ALVIN
219 BROAD ST
GRETN FL 32332

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

SIGNATURE

Rev Alvin Bush

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

4-01-07

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BROWN, REV MOSES SR
STREET ADDRESS 2038 OSCEOLA ST
CITY-STATE-ZIP QUINCY FL 32351

TITLE D ☐ Delete
NAME BOWEN, REV ROBERT
STREET ADDRESS 210 THOMAS AVE
CITY-STATE-ZIP GRETN FL 32332

TITLE D ☐ Delete
NAME BUSH, HOLLIS
STREET ADDRESS P.O. BOX 188
CITY-STATE-ZIP GREENSBORO FL 32330

TITLE D ☐ Delete
NAME CREWS, CHARLES
STREET ADDRESS 134 BUCKSKIN CIR
CITY-STATE-ZIP MIDWAY FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
U000000766013
06/07/07-80002-005 61.25

☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Moses Brown Sr.*

6-06-07 (850)627-8700