

2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N03000003474

1. Entity Name
NEW SAINT JAMES MISSIONARY BAPTIST CHURCH, OF
DAYTONA BEACH, FLORIDA, INC.



FILED
Apr 19, 2006 08:00 AM
Secretary of State

Principal Place of Business
418 LAURA STREET
DAYTONA BEACH, FL 32114 US

Mailing Address
418 LAURA STREET
DAYTONA BEACH, FL 32114 US



04142006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3628007

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPBELL, EDDIE C
418 LAURA STREET
DAYTONA BEACH, FL 32114

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 Eddie C. Campbell, Registered Agent Eddie C. Campbell
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4-17-2006
DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
SMITH, ARTHUR
636 VERA STREET
DAYTONA BEACH, FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
EBERHEART, FRANK
616 VERA STREET
DAYTONA BEACH, FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
CORBITT, JESSIE
604 IOWA STREET
DAYTONA BEACH, FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
CULVER, QUINCY L SR
319 GARDEN STREET
DAYTONA BEACH, FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
CAMPBELL, EDDIE C
4 NEW FOREST LOOK
ORMOND BEACH, FL 32174

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BIVENS, CLARENCE
1352 CONTINENTAL DR.
DAYTONA BEACH, FL 32117

000000519580
05/02/06-80059-005 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Eddie C. Campbell, Director
Eddie C. Campbell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-2006
Date

386 2531655
Daytime Phone #