

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003474

FILED
Apr 21, 2009
Secretary of State

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

Current Principal Place of Business:

418 LAURA STREET
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

418 LAURA STREET
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 59-3628007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, EDDIE C
418 LAURA STREET
DAYTONA BEACH, FL 32114 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: DIR () Delete
Name: SMITH, ARTHUR
Address: 636 VERA STREET
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: DIR () Delete
Name: EBERHEART, FRANK
Address: 616 VERA STREET
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: DIR () Delete
Name: CORBITT, JESSIE
Address: 604 IOWA STREET
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: DIR () Delete
Name: CULVER, QUINCY L SR
Address: 319 GARDEN STREET
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: DIR () Delete
Name: CAMPBELL, EDDIE C
Address: 4 NEW FOREST LOOK
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D () Delete
Name: BIVENS, CLARENCE
Address: 1352 CONTINENTAL DR.
City-St-Zip: DAYTONA BEACH, FL 32117 US

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:

Title: () Change () Addition
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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: EDDIE C. CAMPBELL

DIR

04/21/2009

Electronic Signature of Signing Officer or Director

Date