## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002137

FILED Mar 05, 2011 Secretary of State

Entity Name: ST. PAUL PRIMITIVE BAPTIST CHURCH INC.

Current Principal Place of Business: New Principal Place of Business:

702 AVENUE C

HAINES CITY, FL 33844

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 2115 HAINES CITY, FL 338452115

FEI Number: 81-0664478 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

PUGH, WILLIE D 145 PERRY DR

HAINES CITY, FL 33844 US

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: [

Name: PUGH, WILLIE D ELDER
Address: POST OFFICE BOX 1936
City-St-Zip: HAINES CITY, FL 338451936

Title: C

 Name:
 FENN, ANNIE B

 Address:
 456 19TH STREET N. E.

 City-St-Zip:
 WINTER HAVEN, FL 33884

Title: C

Name: PRITCHETT, BENNIE L DEACON

Address: 2204 N. 12TH STREET City-St-Zip: HAINES CITY, FL 33844

Title: 5

Name: WHITE, BETTY J
Address: 2103 BLOSSOM COURT
City St 7in: HAINES CITY EL 23844

City-St-Zip: HAINES CITY, FL 33844

Title: AS

Name: WILLIAMS, ELOISE S
Address: 2405 TANGERINE COURT
City-St-Zip: HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: WILLIE D. PUGH PAST 03/05/2011