


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N04000004721	
1. Entity Name NEW ST. PAUL MISSIONARY BAPTIST CHURCH, INC.,	

Principal Place of Business 550 FRANKLIN STREET BALDWIN, FL 32234-DUV	Mailing Address 550 FRANKLIN STREET BALDWIN, FL 32234-DUV
---	---

DO NOT WRITE IN THIS SPACE



04112005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3414752	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RILEY, LARRY D
 550 FRANKLIN STREET
 BALDWIN, FL 32234

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

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	P RILEY, LARRY D 167 SOUTH BLVD W. MACCLENNEY, FL 32063
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V RILEY, CYNTHIA 167 SOUTH BLVD. MACCLENNEY, FL 32063
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GUNTHER, ORA LEE 878 LAFAYETTE STREET BALDWIN, FL 32234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CUMMINS, CHRISTINE 4371 BOYKINS LANE BALDWIN, FL 32234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BROWN, EDNA 546 MARTIN STREET BALDWIN, FL 32234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILLIAMS, ROBERT 546 MARTIN STREET BALDWIN, FL 32234

U00000313075
 04/18/05-80109-018 70.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Oral Lee Hunter-Ora Lee Gunter* **4-13-2005** **(904)2664767**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #