

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004721

FILED
Jan 26, 2009
Secretary of State

Entity Name: NEW ST. PAUL MISSIONARY BAPTIST CHURCH, INC.,

Current Principal Place of Business:

550 FRANKLIN STREET
BALDWIN, FL 32234 DUV

New Principal Place of Business:

Current Mailing Address:

550 FRANKLIN STREET
BALDWIN, FL 32234 DUV

New Mailing Address:

FEI Number: 59-3414752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, LARRY D
550 FRANKLIN STREET
BALDWIN, FL 32234 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: P () Delete
Name: RILEY, LARRY D
Address: 167 SOUTH BLVD W.
City-St-Zip: MACCLENNEY, FL 32063

Title: V () Delete
Name: RILEY, CYNTHIA
Address: 167 SOUTH BLVD.
City-St-Zip: MACCLENNEY, FL 32063

Title: D () Delete
Name: GUNTHER, ORA LEE
Address: 878 LAFAYETTE STREET
City-St-Zip: BALDWIN, FL 32234

Title: D () Delete
Name: CUMMINS, CHRISTINE
Address: 4371 BOYKINS LANE
City-St-Zip: BALDWIN, FL 32234

Title: D () Delete
Name: BROWN, EDNA
Address: 546 MARTIN STREET
City-St-Zip: BALDWIN, FL 32234

Title: D () Delete
Name: WILLIAMS, ROBERT
Address: 546 MARTIN STREET
City-St-Zip: BALDWIN, FL 32234

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: LARRY RILEY

P

01/26/2009

Electronic Signature of Signing Officer or Director

Date