2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N05000005015

Entity Name: ST. MARY MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

3102 WILEY AVE
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

3102 WILEY AVE
MIMS, FL 32754

New Mailing Address:

FEI Number: 20-2644003 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIGHTSEY, IRA L
3102 WILEY AVE
MIMS, FL 32754 US

Name and Address of New Registered Agent:

LIGHTSEY, IRA L REV
3102 WILEY AVE
MIMS, FL 32754 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: REV. IRA L. LIGHTSEY 01/06/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DC ( ) Delete
Name: MITCHELL, COLEMAN
Address: 2916 CYPRESS AVE
City-St-Zip: MIMS, FL 32754

Title: DC ( ) Delete
Name: MITCHELL, LEROY
Address: 2683 MARIGOLD AVE
City-St-Zip: MIMS, FL 32754

Title: DT ( ) Delete
Name: MCCULLOUGH, ATLAS
Address: 927 GIBSON ST
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete
Name: MOLE, ALFONSO
Address: 1750 TONYA LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete
Name: COLLIER, JW JR
Address: 955 KNOX MCRAE DR APT 4
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete
Name: MCCULLOUGH, ALPHONSO
Address: 4450 DICKENS AVE
City-St-Zip: TITUSVILLE, FL 32780

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
Name:
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: ATLAS MCCULLOUGH DT 01/06/2009
Electronic Signature of Signing Officer or Director Date