## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000006734

FILED Mar 22, 2009 Secretary of State

Entity Name: ST. JAMES AFRICAN METHODIST EPISCOPAL CHURCH, JACKSON COUNTY, MARIANNA,

FLORIDA, INC.

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

C/O ST. JAMES A.M.E. CHURCH 2891 ORANGE STREET MARIANNA, FL 32448

Current Mailing Address: New Mailing Address:

C/O ST. JAMES A.M.E. CHURCH POST OFFICE BOX 806 MARIANNA, FL 32447

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

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

BELL, MELVIN REV.
2891 ORANGE STREET
MARIANNA, FL 32448 US
WOODARD, MARQUE D REV.
2891 ORANGE STREET
MARIANNA, FL 32448 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: MARQUE D. WOODARD 03/22/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 BELL, MELVIN REV.
 Name:
 WOODARD, MARQUE D REV.

 Address:
 2891 ORANGE ST.
 Address:
 2891 ORANGE ST.

 City-St-Zip:
 MARIANNA, FL 32448
 City-St-Zip:
 MARIANNA, FL 32448

 Title:
 DV
 ( ) Delete
 Title:
 DV
 (X) Change ( ) Addition

 Name:
 BRONSON, SONNIE S
 Name:
 CLEMMONS, LADON D

 Address:
 4110 LONG STREET
 Address:
 1090 SEASHORE AVENUE

Address: 4110 LONG STREET Address: 1090 SEASHORE AVENUE City-St-Zip: MARIANNA, FL 32448 City-St-Zip: ALFORD, FL 32420

Title: DT ( ) Delete Title: DT (X) Change ( ) Addition Name: SPEIGHTS, JOHNNY Name: RIVERS, SYBIL V

 Address:
 2810 HAWK STREET
 Address:
 2796 PENNSYLVANIA AVENUE

 City-St-Zip:
 MARIANNA, FL 32448
 City-St-Zip:
 MARIANNA, FL 32448

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

 Name:
 ELLIS, BETTY P
 Name:
 WYNN, GWENDOLYN

 Address:
 2840 WINDSOR LANE
 Address:
 2964 SUNRISE DRIVE

 City-St-Zip:
 MARIANNA, FL 32448
 City-St-Zip:
 MARIANNA, FL 32448

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: MARQUE D. WOODARD REV 03/22/2009