2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006
Secretary of State

DOCUMENT# N05000008365

Entity Name: SUWANNEE RIVER PROGRESSIVE MISSIONARY BAPTIST ASSOCIATION, INC.

Current Principal Place of Business:

948 NE ABERDEEN AVENUE
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

948 NE ABERDEEN AVENUE
LAKE CITY, FL 32055

New Mailing Address:

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

Name and Address of Current Registered Agent:

POLLOCK, DWIGHT MODERAT
1124 PARK LANE
JASPER, FL 32052 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:	POLLOCK, DWIGHT MODERAT	
Address:	1124 PARK LANE	
City-St-Zip:	JASPER, FL 32052	
Title:	VP	( ) Delete
Name:	JONES, WILLIAM 1ST VM	
Address:	P.O. BOX 405	
City-St-Zip:	CALLAHAN, FL 32011	
Title:	VP	( ) Delete
Name:	CARTER, GILFORD 2ND VM	
Address:	4546 NW 13TH STREET LOT 34	
City-St-Zip:	GAINESVILLE, FL 32609	
Title:	SEC	( ) Delete
Name:	BROWN, ALICE SEC.	
Address:	1560 NW 1ST AVE	
City-St-Zip:	HIGH SPRINGS, FL 32643	
Title:	OFF	( ) Delete
Name:	WILLIAMS, ISADORE L TRUSTEE	
Address:	590 N.W. LONG STREET	
City-St-Zip:	LAKE CITY, FL 32056	
Title:	OFF	( ) Delete
Name:	LEE, GUSSIE M TRUSTEE	
Address:	15205 N.W 278TH AVENUE	
City-St-Zip:	ALACHUA, FL 32615	

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 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: DWIGHT POLLOCK PRES 03/09/2006
Electronic Signature of Signing Officer or Director — Date