

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008495

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** JOHNSON CHAPEL MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

1334 N.E. 4TH AVENUE  
GAINESVILLE, FL 32641

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2123  
GAINESVILLE, FL 326022123

**New Mailing Address:**

P.O. BOX 140173  
GAINESVILLE, FL 326140173 US

**FEI Number:** 87-0768223

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLEON JENKINS  
5630 NW 29TH ST.  
GAINESVILLE, FL 32653 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: PD  
Name: JENKINS, CLEON  
Address: 5630 NW 29TH ST  
City-St-Zip: GAINESVILLE, FL 32653 US

Title: D  
Name: JONES, GEORGE W  
Address: 212 SE 14TH LANE  
City-St-Zip: GAINESVILLE, FL 32601 US

Title: VPD  
Name: MOSLEY, THELMA J  
Address: 939 SE 12TH AVE  
City-St-Zip: GAINESVILLE, FL 326018013 US

Title: TD  
Name: MORRIS, RUTH M  
Address: 6801 NW 33RD ST  
City-St-Zip: GAINESVILLE, FL 32653 US

Title: D  
Name: JACKSON, EDGAR  
Address: 3616 SE 33RD WAY  
City-St-Zip: GAINESVILLE, FL 32641 US

Title: D  
Name: MARTIN, ROSA J  
Address: 6110 NW 32ND STREET  
City-St-Zip: GAINESVILLE, FL 32653 US

I hereby 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 all other like empowered.

SIGNATURE: CLEON JENKINS

PD

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date