

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009116

FILED
Jan 14, 2008
Secretary of State

Entity Name: ST. JOHN MISSIONARY BAPTIST CHURCH OF ORANGE PARK, INC.

Current Principal Place of Business:

135 BRICKYARD ROAD
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

135 BRICKYARD ROAD
MIDDLEBURG, FL 32068

New Mailing Address:

PO BOX 431
ORANGE PARK, FL 32073

FEI Number: 20-3859953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDAGENT.COM, INC
1543-5 KINGSLEY AVE
ORANGE PARK, FL 32073 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: D () Delete
Name: PARKER, BERNICE
Address: 135 BRICKYARD ROAD
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: SCARLETT, DESMOND
Address: 135 BRICKYARD ROAD
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: BRISTER, PEGGY
Address: 135 BRICKYARD ROAD
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: ROBLES, DANA
Address: 135 BRICKYARD ROAD
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: JOHNSON, HOMER
Address: 135 BRICKYARD ROAD
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: JENKINS-PARKER, TRACY
Address: 135 BRICKYARD ROAD
City-St-Zip: MIDDLEBURG, FL 32068

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: BERNICE PARKER

D

01/14/2008

Electronic Signature of Signing Officer or Director

Date