

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011491

FILED
Apr 24, 2011
Secretary of State

Entity Name: ST. JAMES AFRICAN METHODIST EPISCOPAL CHURCH OF ORANGE PARK, INC.

Current Principal Place of Business:

535 MCINTOSH AVENUE
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

535 MCINTOSH AVENUE
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-3230354 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

YOUNG, MCKINLEY BISHOP
101 EAST UNION STREET
SUITE 300
JACKSONVILLE, FL 32202 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: CD
Name: FORD-BURSE, ALESIA REVEREN
Address: 2031 BLUEBONNET WAY
City-St-Zip: ORANGE PARK, FL 32003

Title: D
Name: SANCHEZ, ZINA
Address: 203 KETTING COURT
City-St-Zip: ORANGE PARK, FL 32073

Title: D
Name: OWENS, CAROL
Address: 8908 SPRING HARVEST DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: D
Name: MARTIN, CLIFFORD
Address: 7920 LOCHNESS COURT
City-St-Zip: JACKSONVILLE, FL 32244

Title: D
Name: BIVENS, BARBARA
Address: 152 PASSAGE
City-St-Zip: ORANGE PARK, FL 32003

Title: D
Name: WARE, DOROTHY
Address: 1706 BARLETT AVE
City-St-Zip: ORANGE PARK, FL 32073

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: ALESIA FORD-BURSE

CD

04/24/2011

Electronic Signature of Signing Officer or Director

_____ Date