

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 31, 2011
Secretary of State

Entity Name: ST. PAUL AFRICAN METHODIST EPISCOPAL CHURCH OF FT. MEADE, FLORIDA, INC.

Current Principal Place of Business:

31 SE DR. MARTIN LUTHER KING JR STREET
FT. MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 130
FT. MEADE, FL 33841

New Mailing Address:

FEI Number: 59-3095813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, MCKINLEY
101 EAST UNION STREET STE V300
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: ANCRUM, RUBIN E
Address: P.O. BOX 621
City-St-Zip: SEBRING, FL 33870

Title: D
Name: FULSE, LANCE
Address: 414 NORTH POLK AVE
City-St-Zip: FT. MEADE, FL 33841

Title: D
Name: MCCLELLAN, GENEVARA
Address: 211SE 8TH STREET
City-St-Zip: FT. MEADE, FL 33841

Title: D
Name: WILLIAMS, MAY
Address: 212 SE 6TH STREET
City-St-Zip: FT. MEADE, FL 33841

Title: D
Name: WILSON, OTIS
Address: 6571 SHEPERD OAKS STREET
City-St-Zip: LAKELAND, FL 33811

Title: D
Name: PENNINGTON, ALTHEA
Address: 15 S.E. 8TH STREET
City-St-Zip: FT MEADE, FL 33841

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: RUBIN E ANCRUM

CD

01/31/2011

Electronic Signature of Signing Officer or Director

Date