

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009484

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** BAY COUNTY INTERDENOMINATIONAL MINISTERIAL ALLIANCE INC

**Current Principal Place of Business:**

900  
SATSUMA AVENUE  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

900  
SATSUMA AVENUE  
PANAMA CITY, FL 32401

**New Mailing Address:**

**FEI Number:** 77-0636451      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GLOVER, LEMUEL D SR  
530 NEW YORK AVENUE  
LYNN HAVEN, FL 32444      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  
Name: WILSON, WOODROW  
Address: 900 SATSUMA AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

Title: SEC  
Name: GARRETT, CATRINA  
Address: 1621 MARTIN LUTHER KING JR BLVD  
City-St-Zip: PANAMA CITY, FL 32405

Title: TREA  
Name: WILLIAMS, JEROME  
Address: 501 EAST 16TH ST  
City-St-Zip: LYNN HAVEN, FL 32444

Title: CHAP  
Name: YOUNG, ALDREDGE  
Address: 406 LANDINGS DR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: MEM  
Name: HAMILTON, JAMES III  
Address: 834 KIRKLIN AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

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: WOODROW WILSON

PRES

04/25/2011

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

\_\_\_\_\_  
Date