

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90233 004 ****61.25

DOCUMENT # N44209 1. Entity Name JERUSALEM MISSIONARY BAPTIST CHURCH OF TALLAHASSEE, INC.					
Principal Place of Business 2015 LAKE BRADFORD ROAD TALLAHASSEE, FL 32310			Mailing Address 2015 LAKE BRADFORD ROAD TALLAHASSEE, FL 32310		
2. Principal Place of Business Same As Above Suite, Apt. #, etc.		3. Mailing Address Same As Above Suite, Apt. #, etc.			
City & State Tall, FL. Zip 32310		City & State Tall, FL. Zip 32310		4. FEI Number 59-3080723	
Country LEON		Country LEON		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WRIGHT, JOSEPH 4873 LAKE PARK DR TALLAHASSEE, FL 32311				7. Name and Address of New Registered Agent Name Joseph Wright Street Address (P.O. Box Number is Not Acceptable) 4873 LAKE PARK DR. TALL, FL. 32311 City TALL	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Joseph Wright</i></u> 4/16/04 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WRIGHT, JOSEPH T 1575 KEILY RUN TALLAHASSEE, FL 32301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PALMORE, WAVERLY 822 FLAGG ST TALLAHASSEE, FL 32311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BURGESS, SAMUEL 2015 LAKE BRADFORD ROAD TALLAHASSEE, FL 32310	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEMPS, TERRALYN 2015 LAKE BRADFORD RD TALLAHASSEE, FL 32310	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STARLING, CARL 2015 LAKE BRAFOR D. TALLAHASSEE, FL 32310	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JOHN DAVID THOMAS 2015 LAKE BRADFORD RD. TALL, Florida 32310		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Joseph T. Wright</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/16/04		850-574-6930	