

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45153

FILED  
Jan 22, 2007  
Secretary of State

**Entity Name:** SAINT MARK MISSIONARY BAPTIST CHURCH OF FORT PIERCE, INC.

**Current Principal Place of Business:**

921 ORANGE AVENUE  
FT. PIERCE, FL 34950 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1625  
FT. PIERCE, FL 349541625 US

**New Mailing Address:**

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

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

KINCEY, HARRY  
5104 MANTANZAS AVE  
FT PIERCE, FL 34946 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: PD ( ) Delete  
Name: INGRAM, JONATHAN,  
Address: 4700 JUANITA AVE  
City-St-Zip: FT PIERCE, FL 34947

Title: TD ( ) Delete  
Name: ROBINSON, TERRY  
Address: 2705 AVENUE R  
City-St-Zip: FT PIERCE, FL 34947

Title: TD ( ) Delete  
Name: MILLER, WILLIE  
Address: 2913 N. 25TH ST.  
City-St-Zip: FT. PIERCE, FL 34946

Title: TD ( ) Delete  
Name: WILLIAMS, JULIUS  
Address: 2706 AVENUE S  
City-St-Zip: FORT PIERCE, FL 34947

Title: SD ( ) Delete  
Name: JAMES, MAGALENE  
Address: 3707 AVENUE Q  
City-St-Zip: FORT PIERCE, FL 34947

Title: TD ( ) Delete  
Name: KINCEY, HARRY,  
Address: 5104 MANTANZAS AVE  
City-St-Zip: FT PIERCE, FL 34946

**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: SD (X) Change ( ) Addition  
Name: LOVE, NANCY  
Address: 108 N. 40TH STREET  
City-St-Zip: FORT PIERCE, FL 34947

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HARRY KINCEY

RA

01/22/2007

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

\_\_\_\_\_  
Date