

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45354

FILED  
Jan 18, 2011  
Secretary of State

**Entity Name:** NEW SALEM PRIMITIVE BAPTIST CHURCH OF JESUS CHRIST, INCORPORATE D

**Current Principal Place of Business:**

1500 WEST 12TH STREET  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2961  
SANFORD, FL 32772 US

**New Mailing Address:**

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

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

DAVIS, JOYCE  
709 EAST 6TH STREET  
SANFORD, FL 32771 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: D  
Name: HAYNES, JAMES E ELDER  
Address: 2717 SE 45TH AVENUE  
City-St-Zip: OCALA, FL 34480

Title: C  
Name: ROUSE, ISIAH  
Address: 1813 COOLIGE AVE  
City-St-Zip: SANFORD, FL 32771

Title: S  
Name: PETERSON, ASHLEY  
Address: 141 ESTATES CIRCLE  
City-St-Zip: LAKE MARY, FL 32746

Title: T  
Name: WRIGHT, SANDRA  
Address: 148 PINEFIELD DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: V  
Name: WRIGHT, WILLIAM  
Address: 1409 WILLIAMS AVENUE  
City-St-Zip: SANFORD, FL 32771

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: ELDER JAMES E. HAYNES, JR.

D

01/18/2011

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

\_\_\_\_\_ Date