FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JAN 19 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0048867

DOCUMENT # **N47108**

1. Corporation Name
NEW SALEM MISSIONARY BAPTIST CHURCH OF TAMPA, IN C.

Principal Place of Business	Mailing Address
405 N OREGON AVENUE TAMPA FL 33606	405 N OREGON AVENUE TAMPA FL 33606

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21	26	01/31/1992
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2390371 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WRIGHT-DOUGLAS, KAYDELL 110 N. ARMENIA AVENUE SUITE A TAMPA FL	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 3808027522243--9 83 -01/22/99--01114--016 84 City ******8.75 FL 85 Zip Code ******8.75

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	☑ DELETE	1.1 TITLE	P	☑ Change ☐ Addition
NAME	WILLIAMS, HENRY T.		1.2 NAME	Graham, Ronald	
STREET ADDRESS	416 S. ORLEANS		1.3 STREET ADDRESS	1920 State St.	
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP	Tampa, Fl 33606	
TITLE	PD	☑ DELETE	2.1 TITLE	V	☑ Change ☐ Addition
NAME	HART, LEONARD		2.2 NAME	Spencer Rufus, Jr.	
STREET ADDRESS	3303 E. MCBERRY STREET		2.3 STREET ADDRESS	2717 Bryan Manor Dr.	
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP	Tampa, Fl 33511	
TITLE	TD	☐ DELETE	3.1 TITLE	D	☑ Change ☐ Addition
NAME	WILSON, LINDA 3808027522243--9		3.2 NAME	Martin, George Rev.	
STREET ADDRESS	4122 GRACE STREET -01/22/99--01114--017		3.3 STREET ADDRESS	1012 Kirkland Dr.	
CITY-ST-ZIP	TAMPA FL *****61.25 *****61.25		3.4 CITY-ST-ZIP	Tampa, Fl 33619	
TITLE	SD	☐ DELETE	4.1 TITLE	D	☑ Change ☐ Addition
NAME	HARVLYN, GLMP		4.2 NAME	Solomon, Devorah	
STREET ADDRESS	4311 CATER STREET		4.3 STREET ADDRESS	10933 N. 29th St.	
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP	Tampa, Fl 33612	
TITLE	D	☑ DELETE	5.1 TITLE	D	☑ Change ☐ Addition
NAME	WILSON, PARIS J		5.2 NAME	Hall, Cassandra	
STREET ADDRESS	3201 E. MARTIN LUTHER KING BLVD		5.3 STREET ADDRESS	4103 Grace St.	
CITY-ST-ZIP	TAMPA FL		5.4 CITY-ST-ZIP	Tampa, Fl 33607	
TITLE	D	☑ DELETE	6.1 TITLE	D	☐ Change ☐ Addition
NAME	ISAIAH, YOUNG		6.2 NAME	Dunnigan, Arthur Sr.	
STREET ADDRESS	4010 LASALLE		6.3 STREET ADDRESS	4208 Nassau St.	
CITY-ST-ZIP	TAMPA FL		6.4 CITY-ST-ZIP	Tampa, Fl 33607	

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Linda N. Wilson REQUIRED 01-14-99 (813) 251-3389
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

New Salem Missionary Baptist Church

OF TAMPA, INC.
405 North Oregon Avenue - Tampa, Florida 33606
P. Fitzgerald Readon, Sr. - Pastor/Teacher
Phone: (813)-251-3389

January 14, 1999

Florida Department Of State
Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: New Salem Missionary Baptist Church of Tampa, Inc.
FEI Number: 59-2390371

Dear Sir or Madam:

Attached and please include the following additional named officers and their titles, of the above-mentioned corporation which are listed below.

Title:	D	Title:	D
Name:	Ford, Maritha	Name:	Ligon, Edna
Address:	706 N. Willow Ave.	Address:	3409 St. John Street
City-St.-Zip:	Tampa, Fl, 33606	City-St.-Zip:	Tampa, Fl, 33607

Title:	D
Name:	Monroe, Shirley
Address:	9010 Arndale Circle
City-St.-Zip:	Tampa, Fl, 33615

Additionally, please accept this memorandum as an official request for a "Certificate Of Status." Enclosed please find the Corporation's check in the amount of $8.75 to cover the fee.

Sincerely,

Rev. Phillip F. Readon

Reverend Phillip F. Readon, Pastor
New Salem Missionary Baptist Church of Tampa, Inc.

Enclosure: Check # _____ to cover fee for Certificate of Status