2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000301

FILED Apr 28, 2006 Secretary of State

Entity Name: ST. MARY A.M.E. CHURCH AND CEMETERY, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1013 MARTIN LUTHER KING BLVD. SEFFNER, FL 33584 US

Current Mailing Address: New Mailing Address:

P.O. BOX 27

SEFFNER, FL 33584 US

FEI Number: 59-3151638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

JACKSON, GREGORY

2114 SHADY POINT LANE

BRANDON, FL 33510 US

NELSON, RON E

4345 IRIS STREET S

LAKELAND, FL 33813 US

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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: PASTOR, RON NELSON 04/28/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 NELSON, RONNIE PASTOR
 Name:
 JACKSON, GREGORY STEWARD

 Address:
 4345 IRIS STREET S
 Address:
 2114 SHADY POINT LANE

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:
 BRANDON, FL 33510

Title: () Delete Title: (X) Change () Addition JACKSON, GREGORY Name: Name: WARMACK, RONNIE STEWARD Address: 2114 SHADY POINT LANE Address: 5033 1/2 PINE STREET City-St-Zip: BRANDON, FL 33510 City-St-Zip: SEFFNER, FL 33584

Title: D () Delete Title: D (X) Change () Addition
Name: WARMACK, RONNIE Name: HOLLOWAY, PATRICIA STEWARD

 Address:
 5033 1/2 PINE STREET
 Address:
 1005 CELTIC COURT

 City-St-Zip:
 SEFFNER, FL 33584
 City-St-Zip:
 BRANDON, FL 33510

Title: D (X) Delete Title: () Change () Addition

 Name:
 HOLLOWAY, PATRICIA
 Name:

 Address:
 1005 CELTIC COURT
 Address:

 City-St-Zip:
 BRANDON, FL 33510
 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: REV. RON NELSON PAST 04/28/2006