## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000029

FILED Apr 12, 2009 Secretary of State

Entity Name: ST. PAUL MISSIONARY BAPTIST CHURCH OF OAKLAND, FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 413 W. OAKLAND AVE OAKLAND, FL 34760 US **Current Mailing Address: New Mailing Address:** P.O. BOX 292 OAKLAND, FL 34760 FEI Number: 59-2440304 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: MOORE, IRVIN MOORE, IRVIN 304 W SADLER AVE 301 W SADLER AVE OAKLAND, FL 34760 US OAKLAND, FL 34760 US 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: 04/12/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MOORE, IRVIN MOORE, IRVIN Name: Name: 304 W SADLER ST Address: 304 W SADLER AVE. Address: City-St-Zip: OAKLAND, FL 34760 City-St-Zip: OAKLAND, FL 34760 Title: Title: (X) Change ( ) Addition ( ) Delete Name: MOSBY, JULIUS Name: MOSBY, JULIUS Address: 301 HULL AVE. Address: 301 W. HULL AVE City-St-Zip: OAKLAND, FL 34760 City-St-Zip: OAKLAND, FL 34760 Title: () Delete Title: (X) Change ( ) Addition WADE, BRUCE JOHNSON, DARRELL Name: Name: Address: 1027 LEE AVE Address: 5577 GATLIN AVE City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ORLANDO, FL 32812 () Change () Addition Title: (X) Delete Title: Name: MASSEY, BARBARA Name: Address: 428 W GULLEY AVE Address: City-St-Zip: OAKLAND, FL 34760 City-St-Zip: Title: (X) Delete Title: () Change () Addition MOSBY, DIANA Name: Name: 120 S WALKER ST Address: Address: City-St-Zip: OAKLAND, FL 34760 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: IRVIN MOORE D 04/12/2009