2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 08, 2011
Secretary of State

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

Current Principal Place of Business:

813 PINE AVENUE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

813 PINE AVENUE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-2966599 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLIVER, LOWMAN III
813 PINE AVENUE
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: P
Name: OLIVER, LOWMAN J III
Address: 2726 BUNGALOW BLVD
City-St-Zip: SANFORD, FL 32771

Title: D
Name: BOYD, WONZEL
Address: 1114 ORANGE AVE
City-St-Zip: SANFORD, FL 32771

Title: D
Name: HARPER, ROBERTA
Address: 2816 UNIVERSITY ACRES DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: D
Name: HARPER, JOHN
Address: 2816 UNIVERSITY ACRES DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: D
Name: WALKER, TERRENCE
Address: 265 MCKAY BLVD
City-St-Zip: SANFORD, FL 32771

Title: D
Name: HOLT, BRIAN
Address: 731 SAXON BLVD
City-St-Zip: DELTONA, FL 32725

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: LOWMAN OLIVER P 09/08/2011

Electronic Signature of Signing Officer or Director — Date