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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # N93000002476

1. Corporation Name

NEW MOUNT CALVARY MISSIONARY BAPTIST CHURCH, INC

Principal Place of Business
**1109 WEST 12TH STREET
SANFORD FL 32771**

Mailing Address
**P.O. BOX 1821
SANFORD FL 32772-1821**



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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 06/01/1993	
4. FEI Number 59-2705029		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees			
9. Name and Address of Current Registered Agent BROWN, EDWARD SR 227 PANAMA ROAD WINTER SPRINGS FL 32708				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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 <i>[Signature]</i> DATE 1/24/99 (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE TP <input type="checkbox"/> DELETE NAME BROWN, SR. E L. STREET ADDRESS 227 PANAMA ROAD CITY-ST-ZIP WINTER SPRINGS FL				1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE VD <input type="checkbox"/> DELETE NAME CORBETT, WILLIE STREET ADDRESS 701 PECAN AVE CITY-ST-ZIP SANFORD FL 32771				2.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME VD MCGILL, DERRY JR. 2.3 STREET ADDRESS 1704 W. 18TH ST. 2.4 CITY-ST-ZIP SANFORD, FL. 32771	
TITLE VD <input type="checkbox"/> DELETE NAME JACKSON, JACK STREET ADDRESS 1901 W. 16TH STREET CITY-ST-ZIP SANFORD FL 32771				3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE ST <input type="checkbox"/> DELETE NAME SMITH, JACQUELINE FOR STREET ADDRESS 132 ACADEMY AVE CITY-ST-ZIP SANFORD FL				4.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME ST SIMMONS, JANET M. 4.3 STREET ADDRESS 1446 STEEPLECHASE LN. 4.4 CITY-ST-ZIP DELTONA, FL. 32725	
TITLE T <input type="checkbox"/> DELETE NAME ROYALS, SR. C W. STREET ADDRESS 1805 KNOX AVENUE CITY-ST-ZIP SANFORD FL				5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE D <input type="checkbox"/> DELETE NAME MCGILL, DERRY JR STREET ADDRESS 1704 W 18TH ST CITY-ST-ZIP SANFORD FL				6.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME D CORBETT, WILLIE 6.3 STREET ADDRESS 701 PECAN AVE 6.4 CITY-ST-ZIP SANFORD, FL. 32771	

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/99

904-532-9179

CR2E037 (1/98)