

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N93000005667

1. Entity Name
GREATER TRUE VINE MISSIONARY BAPTIST CHURCH, INC.



Principal Place of Business
**130 N PACE BLVD
PENSACOLA, FL 32505**

Mailing Address
**130 N PACE BLVD
PENSACOLA, FL 32505 US**



01092008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3209415

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MIDDLETON, ROSA M
7060 BRIDLEWOOD LANE
PENSACOLA, FL 32526**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rosa M. Middleton
Rosa M. Middleton

January 13, 2008

Signature typed or printed name of registered agent, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
C
NAME
MIDDLETON, ROSA M
STREET ADDRESS
130 N PACE BLVD
CITY-ST-ZIP
PENSACOLA, FL 32505

TITLE
VCT
NAME
CLANTON, CLEVELAND
STREET ADDRESS
1610 LEPLEY RD
CITY-ST-ZIP
PENSACOLA, FL 32534

TITLE
S
NAME
GARRETT, ANNIE
STREET ADDRESS
5285 DURANGO PL
CITY-ST-ZIP
PENSACOLA, FL 32504

TITLE
T
NAME
PETE, DENNIS
STREET ADDRESS
2410 BUENA VISTA ST
CITY-ST-ZIP
PENSACOLA, FL 32503

TITLE
T
NAME
COLE, MAXINE
STREET ADDRESS
5062 HIGHPOINTE
CITY-ST-ZIP
PENSACOLA, FL 32505

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000802702
02/04/08-80010-011 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosa M. Middleton

Rosa M. Middleton

01/13/2008

438-6009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #