

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # N94000000028  
 1. Entity Name  
 PLEASANT GROVE AFRICAN METHODIST EPISCOPAL CHURCH, INC.



Principal Place of Business Mailing Address  
 131 GEORGETOWN SHORTCUT ROAD P.O. BOX 565  
 GEORGETOWN, FL 32139 GEORGETOWN, FL 32139

**DO NOT WRITE IN THIS SPACE**



04212008 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 JOHNSON, SAMUEL J REV  
 131 GEORGETOWN SHORTCUT ROAD  
 GEORGETOWN, FL 32139

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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 Rev. J. Samuel Johnson DATE 4/27/08  
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 NAME STREET ADDRESS CITY-ST-ZIP	T RALEIGH, MCMILLION P.O. BOX 565 /NA GEORGETOWN, FL 32139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WALKER, OPHELIA P.O. BOX 11/NA GEORGETOWN, FL 32139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROWN, MEREDITH 111 VINTAGE LANE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WALKER, LOVARNSO P.O. BOX 565 /NA GEORGETOWN, FL 32139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/19/08-80004-024 61.25  
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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 employees.  
 SIGNATURE: Meredith Brown Meredith Brown DATE 4/27/08  
Signature and typed or printed name of signing officer or director