

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90092 015 \*\*\*\*61.25

**DOCUMENT # N94000004669**

1. Entity Name

ST. PAUL COMMUNITY BAPTIST CHURCH, INC.



Principal Place of Business  
311 S. GARFIELD AVE  
DELAND FL 32724

Mailing Address  
P O BOX 375  
DELAND FL 32721-0375

40000000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number  
59-3284420

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

DEMPS, ALEXANDER  
311 S. GARFIELD AVENUE  
DELAND FL 32724

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME DEMPS, A  
STREET ADDRESS 311 S. GARFIELD AVENUE  
CITY-ST-ZIP DELAND FL 32720

TITLE TR ☐ Delete  
NAME FEASTER, MARION  
STREET ADDRESS 1002 E CAROLINA AVE  
CITY-ST-ZIP DELAND FL 32724

TITLE T ☐ Delete  
NAME MADDOX, ROBERT L  
STREET ADDRESS 1512 CARVER ST.  
CITY-ST-ZIP DELAND FL 32720

TITLE TR ☐ Delete  
NAME WALKER, ROBERT  
STREET ADDRESS 905 SHERWOOD DRIVE  
CITY-ST-ZIP DELAND FL 32720

TITLE TR ☒ Delete  
NAME BROWN, ROZZIE  
STREET ADDRESS 518 W. WINNEMISSETT AVENUE  
CITY-ST-ZIP DELAND FL 32720

TITLE TRC ☐ Delete  
NAME BARKLEY, MARIE M  
STREET ADDRESS 680 S PARSONS AVE  
CITY-ST-ZIP DELAND FL 32720

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Chairman Trustee ☒ Change ☒ Addition  
NAME Oscar Colbert  
STREET ADDRESS East Chelsea St  
CITY-ST-ZIP Deland FL 32720

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Marie M Barkley*

01/22/06

386-734 7372