

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

FILED
Jul 07, 2008 08:00 AM
Secretary of State



07042008 No Chg-NP CR2E037 (4/06)

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4. FEI Number 59-3284420	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

DEMPS, ALEXANDER
311 S. GARFIELD AVENUE
DELAND, FL 32724

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

**Filing Fee is \$61.25
Due by September 12, 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	P DEMPS, A 311 S. GARFIELD AVENUE DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TR FEASTER, MARION 1002 E CAROLINA AVE DELAND, FL 32724
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MADDOX, ROBERT L 1512 CARVER ST. DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TR WALKER, ROBERT 905 SHERWOOD DRIVE DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CT COLBERT, OSCAR E CHELSA ST DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TRC BARKLEY, MARIE M 680 S PARSONS AVE DELAND, FL 32720

U00000953541
07/07/08-80002-009 61.25

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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: *Marie M. Barkley* Marie M. Barkley 7/4/08 3869436138
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #