

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005547

FILED
Apr 14, 2006
Secretary of State

Entity Name: ANTIOCH MISSIONARY BAPTIST CHURCH OF OVIEDO, FLORIDA, INCORPORATED

Current Principal Place of Business:

311 EAST BROADWAY ST
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

311 EAST BROADWAY ST
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3164665 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONES, CHARLES
873 SNOW HILL ROAD
GENEVA, FL 32732 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, CHARLES
Address: 873 SNOW HILL ROAD
City-St-Zip: GENEVA, FL 332732

Title: D () Delete
Name: ALLEN, DOUGLAS(DECEAS
Address: 203 STEPHEN ST.
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: ATWATER, STEWART JR
Address: 1543 CARILLON PK DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: CAUTHEN, CHARLES
Address: 1539 THORNHILL CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: MILLER, LARRY E
Address: 150 ZENITH PT
City-St-Zip: GENEVA, FL 32732

Title: D () Delete
Name: TOSSIE, DAVID
Address: 79 BOSTON ST
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES JONES, PASTOR

P

04/14/2006

Electronic Signature of Signing Officer or Director

Date