2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005547

FILED May 04, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 311 EAST BROADWAY ST OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 311 EAST BROADWAY ST OVIEDO, FL 32765 FEI Number: 59-3164665 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, CHARLES 873 SNOW HILL ROAD GENEVA, FL 32732 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JONES, CHARLES Name: Name: 873 SNOW HILL ROAD Address: Address: City-St-Zip: GENEVA, FL 332732 City-St-Zip: Title: Title: (X) Change () Addition () Delete ALLEN, DOUGLAS(DECEAS Name: BOSTON, RUSSELL Name: Address: 203 STEPHEN ST. Address: P.O. BOX 61 City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32762 Title: () Delete Title: (X) Change () Addition ATWATER, STEWART JR BROWN, EDWARD SR Name: Name: 1543 CARILLON PK DRIVE 383 SOUTH MOSS ROAD Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: WINTER SPRINGS, FL 32708 Title: () Delete Title: (X) Change () Addition Name: CAUTHEN, CHARLES Name: BRYANT, MYRON 1539 THORNHILL CIRCLE Address: Address: 4754 JETTY STREET City-St-Zip: OVIEDO, FL 32765 City-St-Zip: ORLANDO, FL 32817 Title: () Delete Title: (X) Change () Addition MILLER, LARRY E CAUTHEN, CHARLES Name: Name: 150 ZENITH PT 1539 THORNHILL CIRCLE Address: Address: City-St-Zip: GENEVA, FL 32732 City-St-Zip: OVIEDO, FL 32765 Title: () Delete Title: (X) Change () Addition TOSSIE, DAVID CLINTON, JOSEPH Name: Name: Address: 79 BOSTON ST Address: 102 NORTH MAGEE CREEK OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 P 05/04/2007