

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005952

FILED
Sep 06, 2005
Secretary of State

Entity Name: NEW COLOSSIANS MISSIONARY BAPTIST CHURCH INC.

Current Principal Place of Business:

1154 W. 31ST ST.
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1154 W. 31ST ST.
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 59-3352023 **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:

HAMMONDS, WILLIAM
7011 LINDA DR.
JACKSONVILLE, FL 32208 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: PD () Delete
Name: MERKISON, AMBROSE
Address: 2578 BARRY DR. S.
City-St-Zip: JACKSONVILLE, FL

Title: VD () Delete
Name: HAMMONDS, WILLIAM
Address: 7011 LINDA DR.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: PEPPLES, ANNIE M
Address: 526 W 21ST STREET
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MERKISON, AMBROSE
Address: 2578 BARRY DR. S.
City-St-Zip: JACKSONVILLE, FL 32208

Title: VD (X) Change () Addition
Name: HAMMONDS, WILLIAM
Address: 7011 LINDA DR.
City-St-Zip: JACKSONVILLE, FL 32208

Title: D (X) Change () Addition
Name: BLACK, JOHN
Address: 3811 SPIRES AVE
City-St-Zip: JACKSONVILLE, FL 32209

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM HAMMONDS

VD

09/06/2005

Electronic Signature of Signing Officer or Director

Date