2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 24, 2009
Secretary of State

DOCUMENT# N97000005823

Entity Name: ST. JAMES BAPTIST CHURCH, INC.

Current Principal Place of Business:

421 SOUTH LINCOLN STREET
BUSHNELL, FL 33513

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 546
BUSHNELL, FL 33513

New Mailing Address:

FEI Number: 59-3461016 **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:

BRITT, MERTICE
305 SOUTHLAND AVENUE
BUSHNELL, FL 33513 US

Name and Address of New Registered Agent:

MACK, JOSEPH
11941 CR 680
WEBSTER, FL 33597 US

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: JOSEPH MACK 09/24/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: GRAHAM, ROBERT
Address: 308 S. PINE STREET
City-St-Zip: BUSHNELL, FL 33513

Title: T ( ) Delete
Name: STEPHENS, CARL
Address: 6608C-476A
City-St-Zip: BUSHNELL, FL 33513

Title: T ( ) Delete
Name: THOMAS, VIRGINA
Address: 323 W. PARKER AVENUE
City-St-Zip: BUSHNELL, FL 33513

Title: D ( ) Delete
Name: BRITT, MERTICE
Address: 305 SOUTHLAND PL.
City-St-Zip: BUSHNELL, FL 33513

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition
Name: GARDNER, JACKIE
Address: 500 YORK STREET
City-St-Zip: WILDWOOD, FL 33513

Title: T (X) Change ( ) Addition
Name: HARRISON, JOHNNY
Address: 6896 WEST COUNTY ROAD 48
City-St-Zip: BUSHNELL, FL 33513

Title: D (X) Change ( ) Addition
Name: EDWARDS, JANNIE
Address: 95 SOUTH HODGE STREET.
City-St-Zip: CENTER HILL, FL 33514

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: ROBERT GRAHAM T 09/24/2009
Electronic Signature of Signing Officer or Director Date