

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000520

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** TRUE BELIEVERS PRIMITIVE BAPTIST CHURCH INC.

**Current Principal Place of Business:**

10340 LEMTURNER RD  
JACKSONVILLE, FL 32218 US

**New Principal Place of Business:**

**Current Mailing Address:**

10905 WINGATE RD.  
JACKSONVILLE, FL 32218 US

**New Mailing Address:**

**FEI Number:** 59-3487354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CHATMAN, JOHNNIE F SR.  
10905 WINGATE RD.  
JACKSONVILLE, FL 32218 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: VPD ( ) Delete  
Name: CHATMAN, JOHNNIE  
Address: 10905 WINGATE RD.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD ( ) Delete  
Name: CHATTMAN, MARY B  
Address: 10905 WINGATE RD.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: TRT ( ) Delete  
Name: PINCKNEY, PHADRA D  
Address: 6847 CHAMPLAIN ROAD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: P ( ) Delete  
Name: CHATMAN, JOHNNIE F  
Address: 10905 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: CP ( ) Delete  
Name: CHATMAN, MARY B  
Address: 10905 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: ST ( ) Delete  
Name: PINCKNEY, PHADRA D  
Address: 6897 CHAMPLAIN ROAD  
City-St-Zip: JACKSONVILLE, FL 32208

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: CHATMAN, JOHNNIE F SR.  
Address: 10905 WINGATE RD.  
City-St-Zip: JACKSONVILLE, FL 32218

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

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

Title: P (X) Change ( ) Addition  
Name: CHATMAN, JOHNNIE F SR.  
Address: 10905 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

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 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: JOHNNIE F. CHATMAN SR.

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date