## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Aug 02, 2004 8:00 am Secretary of State **DOCUMENT # N98000001117** 1. Entity Name 08-02-2004 90017 013 \*\*\*\*61.25 FIRST MISSIONARY BAPTIST CHURCH OF FERNANDINA BEACH, INC. Principal Place of Business Mailing Address **44091490** 20 S. 9TH ST. FERNANDINA BCH FL 32034 20 S. 9TH ST. FERNANDINA BCH FL 32034 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc CR2E037 (4/04) City & State City & State Applied For 4. FEI Number 59-3501055 Not Applicable Zin Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PAYNE, JAMES Street Address (P.O. Box Number is Not Acceptable) 920 VERNON STREET FERNANDINA BCH FL 32034 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Due By September 8, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. ☐ Delete ☐ Change TITLE PAYNE, JAMES NAME NAME akea Dr 920 VERNON STREET STREET ADDRESS STREET ADDRESS FERNANDINA BCH FL 32034 TP0CE City-St-ZIP CITY-ST-ZIP TITLE Change Addition Delete TITLE DELANEY, JAMES NAME NAME 426 N 4+h 2T 219 \$ 11TH ST STREET ADDRESS STREET ADDRESS FERNANDINA BULL, FI 32034 FERNANDINA BCH FL 32034 CITY-ST-ZIP CITY-ST-ZIP DIT KEVIN Brown Delete TITLE TITLE Addition BROWN, KEVIN NAME NAME 8611.1 FIRIDSTONE Dr. 86111 FIELDSTONE DR \_\_ STREET ADDRESS STREET ADDRESS FERNANDINA BCh. FI. 32034 YULEE FL 32097 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE **BLUE, JAMES** NAME NAMÉ 820 S. 11TH ST. 511 SO, 644 ST. STREET ADDRESS STREET ADDRESS FERNANDINA BCH FL 32034 CITY-ST-7IP CITY-ST-ZIP fulee, Fl ☐ Change Addition ☐ Delete TITLE TITLE BROWN, CRAIG sames hooper NAME NAME SCOTT ROAD STREET ADDRESS STREET ADDRESS 50, 5+h 5T. O'NEAL FL 32034 CITY-ST-ZIP CITY-ST-ZIP FERNANDINA ☐ Delete TITLE Addition BLUE, ROBERT SR. NAME 1116 GUM ST. STREET ADDRESS STREET ADDRESS FERNANDINA BCH FL 32034 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_

JAMES PAYNE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JULY 30, 04

Daytime Phone #

**FILED**