

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004159

FILED  
Jun 29, 2010  
Secretary of State

**Entity Name:** ST. LEWIS MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

ST. LEWIS M. BAPTIST CHURCH, INC.  
12162 BROAD STREET  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

ST. LEWIS M. BAPTIST CHURCH, INC.  
12162 BROAD STREET  
BROOKSVILLE, FL 34601

**New Mailing Address:**

**FEI Number:** 65-0825291

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLETHCER, BERNICE N  
22300 WHITMAN ROAD  
BROOKSVILLE, FL 34601 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: DCC  
Name: FLETCHER, BERNICE N  
Address: 22300 WHITMAN ROAD  
City-St-Zip: BROOKSVILLE, FL 34601

Title: DACC  
Name: HOWARD, PAMELA F  
Address: 11950 BROAD STREET  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D  
Name: STEPHENS, EARNESTINE  
Address: 22487 JACOBSON ROAD  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D  
Name: BURNETT, ROBBIE  
Address: 11950 BROAD STREET  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D  
Name: JOHNSON, JANICE  
Address: 22373 WHITMAN RD.  
City-St-Zip: BROOKSVILLE, FL 34601

I hereby 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 all other like empowered.

SIGNATURE: BERNICE N. FLETCHER

DCC

06/29/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date