2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2005
Secretary of State

DOCUMENT# N98000005001

Entity Name: ST. JAMES PRIMITIVE BAPTIST CHURCH OF MULBERRY, INC.

Current Principal Place of Business:

904 SE 4TH STREET
MULBERRY, FL 33860

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 996
MULBERRY, FL 33860

New Mailing Address:

FEI Number: 58-2856266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROOKS, EURA L
5123 FAIR FAX EAST
LAKELAND, FL 33813 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: EURA L BROOKS
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	BROOKS, EDWIN C	
Address:	706 SE 3RD STREET	
City-St-Zip:	MULBERRY, FL 33860	
Title:	VPD	( ) Delete
Name:	WALKER, WALTER M	
Address:	2315 1ST STREET	
City-St-Zip:	MULBERRY, FL 33860	
Title:	D	( ) Delete
Name:	BELL, OTIS	
Address:	3548 WIILIS ROAD	
City-St-Zip:	MULBERRY, FL 33860	
Title:	D	( ) Delete
Name:	DENMARK, NOEL	
Address:	1328 W. HONEY TREE LANE	
City-St-Zip:	LAKELAND, FL 33810	
Title:	DSR	( ) Delete
Name:	BROOKS, EURA L	
Address:	5128 FAIRFAX EAST	
City-St-Zip:	LAKELAND, FL 33860	
Title:	DT	( ) Delete
Name:	BROWN, MARVEEN L	
Address:	2904 WHEELER ST	
City-St-Zip:	GORDON HGT., BARTOW, FL 33831	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: EURA L BROOKS DSR 10/11/2005
Electronic Signature of Signing Officer or Director — Date