

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005001

FILED  
Aug 06, 2007  
Secretary of State

**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 ( )**  
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:**

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

BROOKS, EURA L  
5123 FAIR FAX EAST  
LAKELAND, FL 33813      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: \_\_\_\_\_

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 WILLIS 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 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: EURA L BROOKS

DSR

08/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date