2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008
Secretary of State

DOCUMENT# N98000007177

Entity Name: OPEN DOOR MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

130 N. CALHOUN ST.
EATONVILLE, FL 32751

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2004
EATONVILLE, FL 32751

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BANKS, CHARLIE REV.
409 BASEWOOD LANE
ALTAMONTE SPRINGS, FL 32701 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:	D	( ) Delete
Name:	BRONSON, CALVIN DEA.	
Address:	201 MONROE AVE.	
City-St-Zip:	MAITLAND, FL 32751	
Title:	D	( ) Delete
Name:	SYLVESTER, RUBIN DEA.	
Address:	601 FITZGERALD DR.	
City-St-Zip:	EATONVILLE, FL 32751	
Title:	D	( ) Delete
Name:	JONES, JOHNNY	
Address:	2623 COVENTRY LANE	
City-St-Zip:	OCOEE, FL 34761	
Title:	D	( ) Delete
Name:	ZACHARY, JIDE DEA.	
Address:	845 WEST SWOOFE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	D	( ) Delete
Name:	REEVES, STEVE DEA.	
Address:	4744 MARDELLO BLVD.	
City-St-Zip:	ORLANDO, FL 32811	
Title:	D	( ) Delete
Name:	BILLY, WILLIAM DEA.	
Address:	42 ELIZABETH AVE.	
City-St-Zip:	EATONVILLE, FL 32751	

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: STEVE REEVES SECY 01/29/2008
Electronic Signature of Signing Officer or Director — Date