## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000005539

FILED May 08, 2006 Secretary of State

Entity Name: ST. JOHN PRIMITIVE BAPTIST CHURCH OF MEDULLA, FLORIDA, INC.

Current Principal Place of Business:		New Principal Place of Business:
5235 OLD	P.B. CHURCH HIGHWAY 37 ), FL 33811	
Current M	ailing Address:	New Mailing Address:
	FICE BOX 7278 D, FL 338077278	
In accordanc	59-2368469 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did n Address of Current Registered Agent:	FEI Number Not Applicable ( ) Certificate of Status Desired (X) oot receive the prior notice.  Name and Address of New Registered Agent:
GHENT, SI 5434 LILY I LAKELANE		
	named entity submits this statement for the of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATUF	RE:	
	Electronic Signature of Registered Ag	gent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PCEO () Delete TOWNES, ROBERT D ELDER 1307 SCOTT CIR LAKELAND, FL 33805	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DVP ( ) Delete SMITH, GHENT 5434 LILY RD LAKELAND, FL 33801	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete BROWN, JACKIE SIS. 1240 S. VIRGINIA AVE BARTOW, FL 338306647	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S ( ) Delete RICHARDSON, ANDREA 2523 BLAIR CIRCLE S. LAKELAND, FL 33803	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete JACKSON, JOHNNY 1050 PARKER ROAD LAKELAND, FL 33811	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	( ) Delete	Title: T ( ) Change (X) Addition Name: GALLON, ERIC SR. Address: 5868 TROPHY LOOP City-St-Zip: LAKELAND, FL 338112071

I hereby certify that the information supplied with this filing does not qualify for the 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: JACQUELIN D. BROWN T 05/08/2006