

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000008717

**Entity Name:** THE NEW ST. PAUL MISSIONARY BAPTIST CHURCH OF LIMESTONE,INC.

**Current Principal Place of Business:**

5095 WASHINGTON AVE.  
ONA, FL 33865

**Current Mailing Address:**

PO BOX 357  
ONA, FL 33865 US

**FEI Number: 14-1851097**

**Certificate of Status Desired: Yes**

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

THE NEW ST. PAUL MISSIONARY BAPTIST CHURCH OF LIMESTONE, INC  
5095 WASHINGTON AVE  
ONA, FL 33865 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: JERNICE HOLLIMON

03/16/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	C	Title	S
Name	HOLLIMON, JERNICE I	Name	HOLLIMON, JERNICE I
Address	PO BOX 357	Address	PO BOX 357
City-State-Zip:	ONA FL 33865	City-State-Zip:	ONA FL 33865
Title	VP	Title	DIRECTOR
Name	BESSENT, HARRIETTE	Name	BESSENT, HARRY
Address	PO BOX 357	Address	PO BOX 357
City-State-Zip:	ONA FL 33865	City-State-Zip:	ONA FL 33865
Title	OFFICER		
Name	WILLIAMS, GERALDINE		
Address	1150 MARTIN LUTHER KING BLVD		
City-State-Zip:	BARTOW FL 33830		

*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: JERNICE HOLLIMON

PRESIDENT

03/16/2022

Electronic Signature of Signing Officer/Director Detail

Date