

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000010352

**Entity Name:** SUWANNEE MISSIONARY BAPTIST ASSOCIATION INC**Current Principal Place of Business:**1747 SOUTH WALKER AVE  
LIVE OAK, FL 32064**Current Mailing Address:**1747 SOUTH WALKER AVE  
LIVE OAK, FL 32064**FEI Number:** 59-2212349**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALKER, DONALD R DR.  
1747 S WALKER AVE  
LIVE OAK, FL 32064 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

**Officer/Director Detail :**

Title MODERATOR  
Name HUTTO, ROGER REV.  
Address 613 NW 4TH STREET  
City-State-Zip: JASPER FL 32052

Title VICE MODERATOR  
Name WEAVER, WALLY REV.  
Address 5314 98TH TERR  
City-State-Zip: LIVE OAK FL 32060

Title MOBILIZE DIRECTOR  
Name JONES, KEITH REV  
Address 9544 E CR 349  
City-State-Zip: O'BRIEN FL 32071

Title AT LARGE MEMBER  
Name MCKEITHEN, DAVID REV  
Address 5203 CR 795 N  
City-State-Zip: LIVE OAK FL 32060

Title TREASURER  
Name GRAY, GERALD MR.  
Address 1747 S. WALKER AVENUE  
City-State-Zip: LIVE OAK FL 32064

Title CLERK  
Name PREVATT, CRISTI  
Address 8886 141AT LANE  
City-State-Zip: LIVE OAK FL 32060

Title MATURITY DIRECTOR  
Name MAIN, DANIEL REV  
Address 607 SUWANNEE AVENUE  
City-State-Zip: BRANFORD FL 32008

Title AT LARGE MEMBER  
Name RODRIGUEZ, JONATHAN REV  
Address 920 11TH STREET  
City-State-Zip: LIVE OAK FL 32064

**Continues on page 2**

*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:** CRISTI PREVATT

CLERK

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	EXECUTIVE DIRECTOR
Name	WALKER, DONALD DR.
Address	1714 SW WALKER AVENUE
City-State-Zip:	LIVE OAK FL 32064