

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000002305

**Entity Name:** ST. JAMES AFRICAN METHODIST EPISCOPAL CHURCH OF  
INVERNESS, INC.

**Current Principal Place of Business:**

204 NORTH APOPKA AVE  
INVERNESS, FL 34450

**Current Mailing Address:**

P.O. BOX 2664  
INVERNESS, FL 34451

**FEI Number:** 59-3010729

**Certificate of Status Desired:** No

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

RICHARDSON, ADAM JJR.  
101 E. UNION STREET  
SUITE 301  
JACKSONVILLE, FL 32202 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 DP  
Name DORSEY, LUCUIS C PASTOR  
Address P.O.BOX 2664  
City-State-Zip: INVERNESS, FL 34451

Title D  
Name FRANKLIN, IDA P STEWARD  
Address 1320 POE STREET  
City-State-Zip: INVERNESS FL 34450

Title D  
Name FRANKLIN, PHERDORIS  
Address 918 SAWYER ST  
City-State-Zip: INVERNESS, FL 34450

*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:** PHERDORIS FRANKLIN

**STEWARD/SECRETARY**

**01/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date