

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004233

**Entity Name:** ROCKY SPRINGS MISSIONARY BAPTIST CHURCH  
INCORPORATED

**FILED**  
**Mar 24, 2017**  
**Secretary of State**  
**CC4232181227**

**Current Principal Place of Business:**

4368 N SR 53  
MADISON, FL 32340

**Current Mailing Address:**

323 NE ALDER WAY  
MADISON, FL 32340

**FEI Number: 26-4684457**

**Certificate of Status Desired: No**

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

ROBINSON, FRANKIE ESR  
323 NE ALDER WAY  
MADISON, FL 32340 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 T  
Name ALEXANDER, ALPHONSO  
Address 4368 N SR 53  
City-State-Zip: MADISON FL 32340

Title T  
Name ALEXANDER, CHARLIE  
Address 4368 N SR 53  
City-State-Zip: MADISON FL 32340

Title T  
Name BROOKS, JOSEPH  
Address 707 MARTIN MAYHU ST  
City-State-Zip: LIVE OAK FL 32064

Title T  
Name NEWSOME, JIMMY SR  
Address 8580 SUMMERHILL RD  
City-State-Zip: BOSTON GA 31626

Title T  
Name ROBINSON, THARRON  
Address 30 NE BAMBOO TRAIL  
City-State-Zip: MADISON FL 32340

Title T  
Name MCGEE, JOHNNY JR  
Address 4368 N SR 53  
City-State-Zip: MADISON FL 32340

*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: JIMMY NEWSOME SR**

**TRUSTEE**

**03/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date