

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000006609

**FILED  
Mar 04, 2018  
Secretary of State  
CC0550755120**

**Entity Name:** ST. JOHN MISSIONARY BAPTIST CHURCH OF LAKE COUNTY, INC.

**Current Principal Place of Business:**

1735 VEECH ROAD  
LEESBURG, FL 34748

**Current Mailing Address:**

1735 VEECH ROAD  
LEESBURG, FL 34748

**FEI Number: 47-4519761**

**Certificate of Status Desired: No**

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

JORDAN, EDWARD P II, ESQ  
1460 EAST HWY 50  
CLERMONT, FL 34711 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 PD  
Name ALLEN, JAMES T  
Address 1735 VEECH ROAD  
City-State-Zip: LEESBURG FL 34748

Title VPD  
Name BLOUNT, EDDIE  
Address 1735 VEECH ROAD  
City-State-Zip: LEESBURG FL 34748

Title TD  
Name GIVENS, WILLIE L  
Address 1735 VEECH ROAD  
City-State-Zip: LEESBURG FL 34748

Title SD  
Name DICKSON, STACY JR  
Address 1735 VEECH ROAD  
City-State-Zip: LEESBURG FL 34748

*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: STACY DICKSON**

**SECRETARY**

**03/04/2018**

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

\_\_\_\_\_  
Date