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

DOCUMENT# N30692

Entity Name: NEW MOUNT OLIVE PRIMITIVE BAPTIST CHURCH OF ST.

PETERSBURG, FLORIDA, INC.

Apr 18, 2016 **Secretary of State** CC4818774715

**FILED** 

## **Current Principal Place of Business:**

3001 18TH AVENUE SOUTH ST. PETERSBURG, FL 33712

# **Current Mailing Address:**

3001 18TH AVENUE SOUTH ST. PETERSBURG, FL 33712 US

FEI Number: 59-2930117 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ROBINSON, ODELL 5573 HIGHLAND ST. S SAINT PETERSBURG, FL 33705 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: ODELL ROBINSON 04/18/2016

> Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title **SECRETARY** Title **TREASURER** Name WILLIAMS, JANIE H. Name NEWKIRK, SANDRA Address 620 38TH ST S Address 3730 5TH AVE S

City-State-Zip: ST. PETERSBURG FL 33711 City-State-Zip: SAINT PETERSBURG FL 33711

Title TRUSTEES CHAIRMAN Title **DEACONS CHAIRMAN** BENTLEY, THELMA L. Name ROBINSON, ODELL Name

Address 5573 HIGHLAND ST S Address 4142 1ST AVE S

City-State-Zip: SAINT PETERSBURG FL 33711 SAINT PETERSBURG FL 33705 City-State-Zip:

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: JANIE H. WILLIAMS

**SECRETARY** 

04/18/2016