2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45354

Entity Name: NEW SALEM PRIMITIVE BAPTIST CHURCH OF JESUS CHRIST,

INCORPORATE D

Current Principal Place of Business:

1500 WEST 12TH STREET SANFORD, FL 32771

Current Mailing Address:

P.O. BOX 2961

SANFORD, FL 32772 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, JOYCE 709 EAST 6TH STREET SANFORD, FL 32771 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

FILED Mar 09, 2022

Secretary of State

0690317420CC

Officer/Director Detail:

| Title | PASTOR | Title | DEACON |
|-----------------|---------------------|-----------------|------------------|
| Name | HAYNES, JAMES | Name | ROUSE, ISIAH |
| Address | 2717 SE 45TH AVENUE | Address | 1813 COOLIGE AVE |
| City-State-Zip: | OCALA FL 34480 | City-State-Zip: | SANFORD FL 32771 |

Title SECRETARY Title DEACON

Name SUTTON, VERGIA Name WRIGHT, WILLIAM

Address 134 ACADEMY AVE Address 1409 WILLIAMS AVENUE City-State-Zip: SANFORD FL 32771 City-State-Zip: SANFORD FL 32771

TitleCO-TRUSTEETitleTREASURERNameDAVIS, JAMESNameWHITE, NEITRA

Address 126 DREW AVENUE Address 3451 WINDLESHORE WAY

City-State-Zip: SANFORD FL 32771 City-State-Zip: SANFORD FL 32773

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: JAMES HAYNES

PASTOR

03/09/2022