

2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N49560

Entity Name: MT. CALVARY MISSIONARY BAPTIST CHURCH OF NEW SMYRNA BEACH, INC.**Current Principal Place of Business:**569 WASHINGTON STREET
NEW SMYRNA BEACH, FL 32168**Current Mailing Address:**P.O. BOX 445
NEW SMYRNA BEACH, FL 32170**FEI Number: 59-2418508****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HAMILTON, DOUGLAS A
569 WASHINGTON STREET
NEW SMYRNA BEACH, FL 32168 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: DOUGLAS A. HAMILTON

02/01/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	HAMILTON, DOUGLAS A	Name	WHITE, MILDRED B
Address	2837 ROXBURY ROAD	Address	540 SINNKA STREET
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	NEW SMYRNA BEACH FL 32168
Title	D	Title	FINANCIAL SECRETARY
Name	BRAGGS, JOAN W	Name	HAMILTON, JESSICA L
Address	1153 FIELD STRET	Address	2837 ROXBURY ROAD
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	WINTER PARK FL 32789
Title	ASSISTANT FINANCE OFFICER AND ASSISTANT CHURCH CLERK	Title	OFFICER
Name	FRAZIER, GLORIA	Name	MELINDA, HAMILTON F
Address	1356 STAR COURT	Address	2837 ROXBURY ROAD
City-State-Zip:	DELTONA FL 32725	City-State-Zip:	WINTER PARK FL 32789

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: DOUGLAS A. HAMILTON

PRESIDENT

02/01/2021

Electronic Signature of Signing Officer/Director Detail

Date