## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005246

Entity Name: SAINT PAUL MISSIONARY BAPTIST CHURCH OF LAKE HELEN,

INC.

FILED Apr 18, 2017 Secretary of State CC3477660346

**Current Principal Place of Business:** 

600 JACKSON STREET LAKE HELEN, FL 32744

## **Current Mailing Address:**

600 JACKSON STREET LAKE HELEN, FL 32744

FEI Number: 59-3425300 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

FOWLER, FLORENCE E 442 JACKSON STREET LAKE HELEN, FL 32744 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: FLORENCE FOWLER 04/18/2017

Electronic Signature of Registered Agent

## Officer/Director Detail:

Title CT Title Т Name FOWLER, ALZADA Name HINES, JOHNNIE Address **492 JACKSON STREET** Address 174 HIBISCUS LANE City-State-Zip: LAKE HELEN FL 32744 City-State-Zip: DELTONA FL 32738 Title Title Т EDWARDS, MATINE T Name SMITH, KEITH SR Name

Address 840 KICKLIGHTER ROAD Address 334 WEST OHIO AVENUE
City-State-Zip: LAKE HELEN FL 32744 City-State-Zip: LAKE HELEN FL 32744

Title T Title TREASURER

NameSMITH, KENNETHNameFOWLER, FLORENCEAddress880 WEST KICKLIGHTER ROADAddress442 JACKSON STREETCity-State-Zip:LAKE HELEN FL 32744City-State-Zip:LAKE HELEN FL 32744

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: FLORENCE FOWLER

**TREASURER** 

04/18/2017

Date