Electronic Signature of Signing Officer/Director Detail

FEI Number: 59-2368469

Current Mailing Address: POST OFFICE BOX 7278 LAKELAND, FL 33807-7278

DOCUMENT# N99000005539

Current Principal Place of Business:

FLORIDA, INC.

ST. JOHN. P.B. CHURCH 5235 OLD HIGHWAY 37 LAKELAND, FL 33811

Name and Address of Current Registered Agent:

MOORE, HERBERT 1050 PARKER ROAD LAKELAND, FL 33811 US

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: ST. JOHN PRIMITIVE BAPTIST CHURCH OF MEDULLA,

FILED Apr 05, 2019 Secretary of State 3387119798CC

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	ELDER, PRESIDENT, CEO	Title	DEACON CHAIRMAN, TRUSTEE
Name	TOWNES, ROBERT D.	Name	MOORE, HERBERT
Address	1307 SCOTT CIR	Address	1050 PARKER ROAD
City-State-Zip:	LAKELAND FL 33805	City-State-Zip:	LAKELAND FL 33811
Title Name Address City-State-Zip:	CO-TRUSTEE, BUSINESS ADMINISTRATOR BROWN, JACQUELIN D. 1240 S. VIRGINIA AVE BARTOW FL 33830-6647	Title Name Address City-State-Zip:	TREASURER, CO-TRUSTEE SMITH, SHIRLEY COUNTRY LANE LAKELAND FL 33805
Title	FINANCIAL SECRETARY, CO- TRUSTEE		
Name	TOWNES-KNIGHTEN, TAMESHA		
Address	1307 SCOTT CIRCLE		
City-State-Zip:	LAKELAND FL 33807		

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: JACQUELIN D.BROWN

BUSINESS ADMINISTRATOR 04/05/2019

Date

Date