FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Principal Place of Business

DOCUMENT # 703207

(1)

Mailing Address

FRIENDSHIP MISSIONARY BAPTIST CHURCH OF WEST PAL M BEACH

718 THIRD S WEST PALM	st. Beach fl 33401	718 THIRD ST. West Palm Beach F	FL 33401	,	3. Date Incorporated or Qualified	3a. Date of L		
					11/16/1961	06/1	19/1995	
	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			65-0295533		Not Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required	
City & State)	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees	
Zip 24	Country Zip 25 30			Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New F	legistered Agent		
			[+	81 Name				
Jackson, Martha B. 210 N.E. 19th Ave.			1	82 Street /	eet Address (P.O. Box Number is Not Acceptable)			
	ON BEACH FL 33435		1	83		<u> </u>	,	
			ļ	84 City		FL 85	Zip Code	
12.	Signafura // just or printed name of registered Agent OFFICERS AND		ČTE: Registered A 13. 11 TiTu		ktulind when reinstalling) ADDITIONS/CHANGES TO OFF	FICERS AND DIRE		
NAME	CHAMLESS, JOSEPH	otte:	1 2 NAM	ME	ROBERT HORNE 1207 // COURT	Olla	- C Radiion	
STREET ADDRESS CITY-ST-ZIP	969 32ND STREET West Palm Beach Fl			REET ADORESS Y-St-Zip	WEST PALM BEACH,	FL 3340	>1	
TILLE	P	DELETE	21 TITL		DEACHD .	Char	nge Addition	
NAME	BOWLING, KENNETH REV.	,	2 2 NAM		HARRY BILLIE	₩-	• —	
STREET ADDRESS	819 SOUTH MAGONIA CIRCL	F		1	」 カノサーノカママ ミブパロビリ			
			■ 23 STR	REET ADDRESS				
CITY-ST-ZIP I	WEST PALM BEACH FL 3340			REET ADORESS TY-ST-ZIP	WEST PALM BEACH		.01	
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	WEST PALM BEACH FL 3340 T PORTER, CHARLES)1	2. 4 CIT	TY-ST-ZIP LE		FL 334		
TITLE NAME	T)1	2. 4 CIT 3 1 TITL 3 2 NAM	TY-ST-ZIP LE		FL 334		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	t Porter, Charles	DELETE	2. 4 CIT 3.1 TITL 3.2 NAM 3.3 STR	TY-ST-ZIP LE ME	WEST PALM BEACH	FL 334	n g e 🔲 Addition	
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

(401) 832-93/2 Cartine Proces