FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 12, 2001 8:00 am Secretary of State DOCUMENT # 703207 1. Entity Name FRIENDSHIP MISSIONARY BAPTIST CHURCH OF WEST PAL 04-12-2001 90051 012 ****61.25 Principal Place of Business Mailing Address 718 THIRD ST. 718 THIRD ST. WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0295533 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BILLIE, HARRY **1367 10TH STREET** WEST PALM BEACH FL 33401 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition TITLE TITLE ☐ Delete NAME RANDOLPH, ANDREW NAME STREET ADDRESS STREET ADDRESS 1001 36TH STREET, #D114 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33407 TITLE ☐ Addition TITLE Delete ☐ Change NAME NAME BILLIE, HARRY STREET ADDRESS STREET ADDRESS 1367 10TH STREET -GITY-ST-ZIP CITY-ST-ZIP. WEST-PALM_BEACH-FL TITLE Delete TITLE Change Addition NAME PORTER. CHARLES NAME STREET ADDRESS STREET ADDRESS 720 WEST 6TH STREET CITY-ST-7IP CITY-ST-7IP RIVIERA BEACH FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Lewis. Dority NAME STREET ADDRESS 706 CLEAR LAKE AVENUE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP WEST PALM BEACH FL TITLE Delete TITLE ☐ Change ■ Addition PEOPLES, EDDIE J NAME NAME STREET ADDRESS STREET ADDRESS 817 43RD STREET CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33407 TITLE □ Delete TITLE Change ■ Addition NAME PRICE, PRICE S NAME STREET ADDRESS STREET ADDRESS 2337 "Z" TERRACE CITY-ST-ZIP **RIVIERA BEACH FL 33404**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR S. Price 4/8/0/ 56-682-6015