

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 23, 2011
Secretary of State**

DOCUMENT# N02000002036

Entity Name: FIRST BELIEVERS CHRISTIAN CENTER, INC.**Current Principal Place of Business:**209 NORTH MAIN ST
HAVANA, FL 32333**New Principal Place of Business:****Current Mailing Address:**POST OFFICE BOX 1357
HAVANA, FL 32333**New Mailing Address:**PO BOX 1357
HAVANA, FL 32333**FEI Number:** 59-3688535**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LITTLE, LEANNE J
209 NORTH MAIN ST
HAVANA, FL 32333 US**Name and Address of New Registered Agent:**

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

Date

OFFICERS AND DIRECTORS:**Title:** CEOD
Name: LITTLE, LEANNE J
Address: 209 NORTH MAIN STREET
City-St-Zip: HAVANA, FL 32333**Title:** CFOD
Name: BODISON, DAISY
Address: 1585 JAMIESON ROAD
City-St-Zip: HAVANA, FL 32333**Title:** D
Name: LESTER, BODISON
Address: 1585 JAMIESON ROAD
City-St-Zip: HAVANA,, FL 32333**Title:** D
Name: BURNS, EDWARD
Address: 117 FERRIER LANE
City-St-Zip: CRAWFORDVILLE, FL 32327**Title:** SD
Name: DICKEY, ELLA P
Address: 115 PARKER KNIGHTS RD
City-St-Zip: MIDWAY, FL 32343

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: LEANNE J. LITTLE

CEOD

09/23/2011

Electronic Signature of Signing Officer or Director

Date