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. 04/03/2016

SIGNATURE: JODY WALLICK

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757545

Entity Name: LONGBRANCH MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

% BARRY WILKINSON 5500 LONG BRANCH CEMETERY ROAD JACKSONVILLE, FL 32234

Current Mailing Address:

% BARRY WILKINSON 5500 LONG BRANCH CEMETERY ROAD JACKSONVILLE, FL 32234

FEI Number: 59-2186318

Name and Address of Current Registered Agent:

WILKINSON, BARRY N. 8731 MAXVILLE BLVD JACKSONVILLE, FL 32234 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.

		0 0	0	
SIGNATURE	BARRY N. WILKINSON			04/03/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	TRUSTEE	Title	TRUSTEE	
Name	OWENS, TYLER	Name	WALLICK, JODY	
Address	5865 BETTY JANE PT	Address	1669 LOUIE CARTER RD	
City-State-Zip:	JACKSONVILLE FL 32234	City-State-Zip:	JACKSONVILLE FL 32234	
Title	TRUSTEE			
Name	KIDD, A C			
Address	819 MATTHEW RD			
City-State-Zip:	JACKSONVILLE FL 32234			

Certificate of Status Desired: No

FILED Apr 03, 2016 Secretary of State CC9831436879