

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009803

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC5973437322**

**Entity Name:** FIRST MISSIONARY BAPTIST CHURCH OF GAINESVILLE, INC.

**Current Principal Place of Business:**

1515 SE 15TH STREET  
GAINESVILLE, FL 32641

**Current Mailing Address:**

1515 SE 15TH STREET  
GAINESVILLE, FL 32641

**FEI Number: 36-4513493**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

BLUE, TYRONE AREV.  
1515 SE 15TH STREET  
GAINESVILLE, FL 32641 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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name BLUE, TYRONE A  
Address P.O. BOX 332  
City-State-Zip: CALLAHAN FL 32011

Title D  
Name SIMMONS, KENNETH  
Address 2833 NE 11TH DR.  
City-State-Zip: GAINESVILLE FL 32609

Title D  
Name MACK, KEVIN  
Address 4408 E UNIVERSITY AVE.  
City-State-Zip: GAINESVILLE FL 32641

Title D  
Name THOMAS, CURTIS  
Address 22652 NW 174 AVE.  
City-State-Zip: HIGH SPRINGS FL 32643

*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: TYRONE A. BLUE**

**PASTOR**

**01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date