2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710288

FILED Apr 29, 2008 Secretary of State

Entity Name: PILGRIMS REST MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 4202 W. NASSAU STREET TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** 4202 W. NASSAU STREET TAMPA, FL 33607 FEI Number: 59-1931656 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COOPER, EDWARD A COOPER, EDWARD A 3410 EAST MCBERRY STREET 3410 MCBERRY TAMPA, FL 33601 US TAMPA, FL 33610 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: 04/29/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete COOPER, EDWARD COOPER, EDWARD A Name: Name: 3410 MCBERRY Address: 3410 EAST MCBERRY STREET Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: TAMPA, FL 33610 Title: Title: D (X) Change () Addition () Delete SIMS, MAMIE Name: SIMS, MAMIE Name: Address: 4316 N. 17TH STREET Address: 4118 ARCH STREET City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33607 Title: () Delete Title: (X) Change () Addition CHARLES, WILLIAM Name: REESE, LINDA C REV. Name: 6903 W. CARSON AVENUE Address: Address: 7614 35TH AVENUE SOUTH City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33619 Title: () Delete Title: () Change () Addition Name: JOHNSON, DARLENE Name: 4207 GRACE ST. Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: Title: () Delete Title: () Change () Addition HAMLET, PATRICIA Name: Name: 4626 BYERLE CIRCLE Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: () Delete Title: () Change (X) Addition WOODS, KENNETH G Name: Name: Address: Address: 7614 35TH AVENUE SOUTH TAMPA, FL 33619 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: COOPER, EDWARD A. D 04/29/2008