

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 24, 2009
Secretary of State

DOCUMENT# 711651

Entity Name: FIRST BAPTIST CHURCH OF FLORIDA CITY, INC.**Current Principal Place of Business:**101 SW REDLAND ROAD
FLORIDA CITY, FL 33034**New Principal Place of Business:****Current Mailing Address:**101 SW REDLAND ROAD
FLORIDA CITY, FL 33034**New Mailing Address:****FEI Number:** 59-1051721**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAILY, MICHAEL . REV.
7855 SW 104TH STREET
SUITE 210
MIAMI, FL 33186 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: PD () Delete
Name: DAILY, MICHAEL M REV.
Address: 14530 SW 142 CT CIR
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Delete
Name: RHOADES, KEN
Address: 18727 SW 29CT. SW 350 ST.
City-St-Zip: MIAMI, FL 33133

Title: SD (X) Delete
Name: FERNANDEZ, ROBERT
Address: 2720 SW 29 CT
City-St-Zip: MIAMI, FL 33133

Title: T (X) Delete
Name: JOHNSON, ZANECCUS L REV.
Address: 30321 S. W. 161 COURT
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HICKSON, VICTOR REV.
Address: 9740 SW 159TH STR
City-St-Zip: MIAMI, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: REV. VICTOR HICKSON

PD

10/24/2009

Electronic Signature of Signing Officer or Director_____
Date