

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713297

FILED
Jan 15, 2008
Secretary of State

Entity Name: MISSIONARY FAITH BAPTIST CHURCH, INC.

Current Principal Place of Business:

4909 SILVER OAK DRIVE
FT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

4909 SILVER OAK DRIVE
FT PIERCE, FL 34982

New Mailing Address:

FEI Number: 65-0039407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAST, RICHARD D.
4909 SILVER OAK DRIVE
FT PIERCE, FL 34982 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: GAST, RICHARD D.
Address: 4909 SILVER OAK DRIVE
City-St-Zip: FT PIERCE, FL

Title: VD () Delete
Name: WELLS, HAROLD E,
Address: 5913 SPRUCE DRIVE
City-St-Zip: FT PIERCE, FL

Title: SD () Delete
Name: WELLS, CATHY L,
Address: 5913 SPRUCE DRIVE
City-St-Zip: FT PIERCE, FL

Title: TD () Delete
Name: WELLS, HAROLD E,
Address: 5913 SPRUCE DIRVE
City-St-Zip: FT PIERCE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RICHARD D. GAST

PD

01/15/2008

Electronic Signature of Signing Officer or Director

Date