2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#732232

FILED Apr 29, 2009 Secretary of State

Entity Name: UNION MISSIONARY BAPTIST CHURCH OF VENICE, INC.

Current Principal Place of Business: New Principal Place of Business:

404 NORTH WARFIELD AVE P.O. BOX 265 404 NORTH WARFIELD AVE VENICE, FL 34292 US

VENICE, FL 34292 US

Current Mailing Address: New Mailing Address:

P.O. BOX 426

LAUREL, FL 34272 US

FEI Number: 59-2673621 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:

MOORE, ROBERT L. 227 NOKOMIS AVENUE SOUTH VENICE, FL 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:

ORL.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 () Delete
 Title:
 O
 (X) Change () Addition

 Name:
 JOHNSON, BOBBY
 Name:
 JOHNSON, BOBBY

Address: PO BOX 641 Address: 742 CHURCH STREET City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete Title: O (X) Change () Addition Name: HOWARD GIPSON Name: HOWARD GIPSON

 Address:
 8330 SWISS BLVD
 Address:
 8330 SWISS BLVD

 City-St-Zip:
 PUNTA GORDA, FL 33982
 City-St-Zip:
 PUNTA GORDA, FL 33982

Title: T () Delete Title: O (X) Change () Addition
Name: MITCHELL, JAMES Name: MITCHELL, JAMES

Address: 2881 TUSKETT AVE
City-St-Zip: NORTH PORT, FL 34287

Name: MITCHELL, JAMES
Address: 2881 TUSKETT AVE
City-St-Zip: NORTH PORT, FL 34287

NORTH PORT, FL 34287

Title: T () Delete Title: O (X) Change () Addition

 Name:
 MITCHELL, TONY
 Name:
 MITCHELL, TONY

 Address:
 650 CHURCH ST
 650 CHURCH ST

 City-St-Zip:
 LAUREL, FL 34275
 City-St-Zip:
 LAUREL, FL 34275

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: TONY MITCHELL O 04/29/2009