2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734115

FILED Aug 07, 2009 Secretary of State

Entity Name: MOUNT PLEASANT PRIMITIVE BAPTIST CHURCH OF FORT MEADE, INC.

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

P.O. BOX 246 125 SOUTH WEST 7TH STREET

125 SOUTH WEST 7TH STREET FT. MEADE, FL 33841

FT. MEADE, FL 33841

Current Mailing Address: New Mailing Address:

P.O. BOX 246 P.O. BOX 246

125 SOUTH WEST 7TH STREET FT. MEADE, FL 33841

FT. MEADE, FL 33841

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ASH, DAVID JR. 402 JUMPER DRIVE BUSHNELL, FL 33513 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: CD () Delete Title: CD (X) Change () Addition Name: HUDNELL, PEGGY J Name: BARFIELD, JIMMIE L SR Address: 716 SOUTH FRENCH AVE Address: 107 9TH STREET EAST

City-St-Zip: FORT MEADE, FL 33841 City-St-Zip: FORT MEADE, FL 33841

 Title:
 ACD () Delete
 Title:

 Name:
 PEARLIE, DANIELS
 Name:

 Address:
 424 SO. LANIER AVE
 Address:

 City-St-Zip:
 FORT MEADE, FL 33841
 City-St-Zip:

Title: TC () Delete Title: () Change () Addition

 Name:
 DAVID, ASH JR.
 Name:

 Address:
 P.O. BOX 89271
 Address:

 City-St-Zip:
 TAMPA, FL 33689
 City-St-Zip:

Title: () Delete Title: ACD () Change (X) Addition

 Name:
 Name:
 MING, SANDRA E

 Address:
 Address:
 2933 MORRIS DRIVE

 City-St-Zip:
 City-St-Zip:
 BARTOW, FL 33830

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: SANDRA E MING TREA 08/07/2009