2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734226

City-St-Zip:

ORLANDO, FL 32818

FILED Jan 21, 2009 Secretary of State

Entity Name: MT. PLEASANT MISSIONARY BAPTIST CHURCH OF ORLANDO, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: ORLANDO, FLORIDA, INC. 4077 PRINĆE HALL BLVD. ORLANDO, FL 328115637 **New Mailing Address: Current Mailing Address:** ORLANDO, FLORIDA, INC. 4077 PRINCE HALL BLVD. ORLANDO, FL 328115637 FEI Number: 59-2651770 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: WRIGHT, BRIAN K 925 RED DANDY DR ORLANDO, FL 32818 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **BMGR** (X) Change () Addition () Delete MCRAE, ORITA WILLIAMS, CHARLES E Name: Name: 930 AMAROS AVENUE Address: 476 SUNNYVIEW CIRCLE Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32810 Title: CEO () Delete Title: () Change () Addition Name: BLACK, O'HARA C Name: Address: 6268 BUFORD STREET Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: () Delete Title: () Change () Addition HAWKINS, WALTER Name: Name: 1401 WEST HARVARD STREET Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: Title: DC () Delete Title: () Change () Addition Name: WRIGHT, BRIAN K Name: Address: 925 RED DANDY DR Address:

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.

City-St-Zip:

SIGNATURE: WILLIAMS, CHARLES E OMGR 01/21/2009