

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755879

FILED
Apr 26, 2009
Secretary of State

Entity Name: ANTIOCH MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

5201 HORTON ROAD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3867
PLANT CITY, FL 335630015

New Mailing Address:

FEI Number: 59-2476549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, GWENDOLYN
5602 JOE KING RD
PLANT CITY, FL 33567 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: T () Delete
Name: WHITE, HENRY
Address: 5505 JOE KING ROAD
City-St-Zip: PLANT CITY, FL 33567

Title: CD () Delete
Name: THOMPSON, FREDDIE
Address: 5418 HORTON RD.
City-St-Zip: PLANT CITY, FL 33567

Title: AT () Delete
Name: HOLLEY, MARTHA
Address: 2702 SAM HICKS RD
City-St-Zip: PLANT CITY, FL 33567

Title: ST () Delete
Name: THOMAS, GWENDOLYN
Address: 5602 JOE KING RD
City-St-Zip: PLANT CITY, FL 33567

Title: D () Delete
Name: MACKEY SR., RODNEY K
Address: 4708 HORTON RD
City-St-Zip: PLANT CITY, FL 33567

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:

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: GWENDOLYN THOMAS

ST

04/26/2009

Electronic Signature of Signing Officer or Director

Date