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FILED
Feb 14 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **758600** (1)
1. Corporation Name
FRIENDSHIP MISSIONARY BAPTIST CHURCH OF FORT PIERCE, FLORIDA, INC.



Principal Place of Business
**1306 AVENUE "E"
FORT PIERCE FL 34950-7947**

Mailing Address
**3104 AVENUE R
FORT PIERCE FL 34947-2042
US**

3. Date Incorporated or Qualified
06/02/1981

3a. Date of Last Report
04/17/1996

4. FEI Number
59-1840427

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**DONALDSON, LAMAR
3104 AVENUE R
FORT PIERCE FL 34947**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> DELETE
NAME	OUTLAW, WILLIAM P	
STREET ADDRESS	3003 AVENUE "Q"	
CITY-ST-ZIP	FORT PIERCE FL	
TITLE	TDP	<input type="checkbox"/> DELETE
NAME	DONALDSON, LAMAR	
STREET ADDRESS	3104 AVENUE "R"	
CITY-ST-ZIP	FORT PIERCE FL	
TITLE	TRD	<input type="checkbox"/> DELETE
NAME	DOZIER, KENNETH	
STREET ADDRESS	211 N.E. OAK LANE	
CITY-ST-ZIP	PORT ST. LUCIE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	JACKSON, ALFRED JR.	
STREET ADDRESS	1306 AVENUE E	
CITY-ST-ZIP	FORT PIERCE FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BROWN, ESTELLE	
STREET ADDRESS	1565 S. BALCOURT CT.	
CITY-ST-ZIP	PORT ST. LUCIE FL	
TITLE	FGS	<input type="checkbox"/> DELETE
NAME	HENRY, VIVAN	
STREET ADDRESS	1504 AVE J	
CITY-ST-ZIP	FT PIERCE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William P. Outlaw **REQUIRED** 2/9/97 461-4730
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0070777

CR2E037 (9/96)