2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#758600

FILED Jun 02, 2006 Secretary of State

Entity Name: FRIENDSHIP MISSIONARY BAPTIST CHURCH OF FORT PIERCE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 1306 AVENUE FORT PIERCE, FL 349507947 **Current Mailing Address: New Mailing Address:** 1306 AVENUE FORT PIERCE, FL 349507947 FEI Number: 59-1840427 FEI Number Applied For () FEI Number Not Applicable () 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: HENRY, VIVIAN 1306 AVENUE E FORT PIERCE, FL 34950 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: CEO () Delete (X) Change () Addition JOHNSON, KENNETH A BROOKS, DANIEL Name: Name: 1306 AVENUE Address: 1306 AVENUE Address: City-St-Zip: FORT PIERCE, FL 349507947 City-St-Zip: FORT PIERCE, FL 349507947 Title: COO () Delete Title: () Change () Addition WATSON, RANDY Name: Name: Address: 1306 AVENUE Address: City-St-Zip: FORT PIERCE, FL 349507947 City-St-Zip: Title: () Delete Title: () Change () Addition HENRY, VIVIAN Name: Name: Address: 1306 AVENUE Address: City-St-Zip: FORT PIERCE, FL 349507947 City-St-Zip: Title: () Delete Title: (X) Change () Addition BROOKS, DANIEL Name: Name: WILLIAMS, KELCEY Address: 1306 AVENUE Address: 1306 AVENUE FORT PIERCE, FL 349507947 City-St-Zip: City-St-Zip: FORT PIERCE, FL 349507947 Title: () Delete Title: () Change () Addition CARTER, GELENCIA Name: Name: 1306 AVENUE Address: Address: FORT PIERCE, FL 349507947 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS, RUTH Name: Name: Address: 1306 AVENUE Address: FORT PIERCE, FL 349507947 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GELENCIA CARTER T 06/02/2006