# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 07, 2010**
**Secretary of State**

DOCUMENT# 770787

**Entity Name:** FRIDAY ROAD WORSHIP CENTER, INC.

**Current Principal Place of Business:**

1855 N FIRDAY ROAD
COCOA, FL 32926 US

**New Principal Place of Business:**

1855 N FRIDAY ROAD
COCOA, FL 32926 US

**Current Mailing Address:**

1855 N. FRIDAY ROAD
COCOA, FL 32926 US

**New Mailing Address:**

**FEI Number: 59-2874667** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PERKINS, ARNOLD R
4820 OXEYE AVE
COCOA, FL 32926 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: PC
Name: PERKINS, DICK
Address: 1855 FRIDAY RD
City-St-Zip: COCOA, FL

Title: PAB
Name: PERKINS, LAURA
Address: 1855 N FRIDAY RD
City-St-Zip: COCOA, FL 32926

Title: D
Name: PERKINS, ANITA
Address: 4820 ONEYE AVE
City-St-Zip: COCOA, FL 32926

Title: D
Name: PATTERSON, DON
Address: 910 RICHLAND AVE.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: PAB
Name: ELLISON, CANDY
Address: 304 CHURCHILL DR
City-St-Zip: COCOA, FL 32922

Title: PAB
Name: STUBBS, THOMAS
Address: 310 RIVER ISLAND DR
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: ARNOLD R. PERKINS REV 01/07/2010

Electronic Signature of Signing Officer or Director Date