

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006029

FILED
Feb 17, 2010
Secretary of State

Entity Name: FRIENDSHIP CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

5411 AVERY RD
CAMPBELLTON, FL 324260000

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 302
CAMPBELLTON, FL 324260000

New Mailing Address:

FEI Number: 59-3483736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWARD, EARNESTINE
5366 AVERY ROAD
CAMPBELLTON, FL 32426 US

Name and Address of New Registered Agent:

MCMILLAN, BENJAMIN C
91 PARK STREET
GRETNA, FL 32332 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: BENJAMIN C. MCMILLAN

02/17/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TS
Name: RHYNES, HELEN
Address: 2458 NEW BETHEL RD
City-St-Zip: CAMPBELLTON, FL 32426

Title: T
Name: MCGRUDER, LOUISE
Address: 1082 SANDERS AVENUE APT. B-1
City-St-Zip: GRACEVILLE, FL 32440

Title: T
Name: DANIELS, JONATHAN
Address: 7990 COUNTY RD 22 EAST
City-St-Zip: ASHFORD, AL 36112

Title: P
Name: BENJAMIN, MCMILLAN C PASTOR
Address: 91 PARK STREET
City-St-Zip: GRETNA, FL 32332

Title: T
Name: KNOX, NOREATHER
Address: 5310 13TH STREET
City-St-Zip: MALONE, FL 32445

Title: TS
Name: MEEKINS, CLEAO
Address: 2701 CAINEHEAD RD
City-St-Zip: CAMPBELLTON, FL 32426

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: BENJAMIN C MCMILLAN

P

02/17/2010

Electronic Signature of Signing Officer or Director

Date