2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2008
Secretary of State

DOCUMENT# N01000007243

Entity Name: FIL-AM MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

723 STAFFORD LANE
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

723 STAFFORD LANE
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-3735789 **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:

MAHONE, DANIEL E
9544 WILLS LN
PO BOX 224
LILLIAN, ALABAMA, FL 36549 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: TREA ( ) Delete
Name: PEREZ, ELENA W
Address: 910 BARTOW AVE
City-St-Zip: PENSACOLA, FL 32507

Title: DEAC ( ) Delete
Name: ROBINSON, SAMUEL T JR
Address: 408 THORN CT
City-St-Zip: PENSACOLA, FL 32526

Title: TREA ( ) Delete
Name: ROBINSON, MALANIA S
Address: 408 THORN CT
City-St-Zip: PENSACOLA, FL 32526

Title: A/T ( ) Delete
Name: JENNINGS, CHARLES F
Address: 11107 BRIDGE CREEK DR
City-St-Zip: PENSACOLA, FL 32506

Title: MS ( ) Delete
Name: ABUNDO, ANNA M
Address: 516 CHANTERELLE CT
City-St-Zip: PENSACOLA, FL 32506

Title: DEAC ( ) Delete
Name: LEONARD, GLENN
Address: 3130 BELLVIEW AVE.
City-St-Zip: PENSACOLA, FL 32526

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:

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: DANIEL E MAHONE PAST 05/28/2008
Electronic Signature of Signing Officer or Director — Date