

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03883

FILED
Mar 11, 2008
Secretary of State

Entity Name: FRIENDSHIP BAPTIST CHURCH OF DAVENPORT, INC.

Current Principal Place of Business:

310 43RD STREET
DAVENPORT, FL 33836

New Principal Place of Business:

Current Mailing Address:

PO BOX 1158
DAVENPORT, FL 33836 US

New Mailing Address:

FEI Number: 05-0144700 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STAMP, WALTER
310 43RD STREET
DAVENPORT, FL 33836 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: TD () Delete
Name: STAMP, WALTER
Address: 310 43RD STREET
City-St-Zip: DAVENPORT, FL 33836

Title: D () Delete
Name: CLARK, MELVIN
Address: 546 SAVANNAH ROAD
City-St-Zip: DAVENPORT, FL 33836

Title: VD () Delete
Name: SHEPHERD, CORNELIOUS
Address: 102 43RD STREET
City-St-Zip: DAVENPORT, FL

Title: PD () Delete
Name: PHILLIPS, CARL REV
Address: 6741 POMEROY CIRCLE
City-St-Zip: ORLANDO, FL 32810

Title: SD () Delete
Name: BLAND, JOHN L
Address: 107 E. FULLER ST
City-St-Zip: DAVENPORT, FL 33836

Title: D () Delete
Name: CHRISTIAN, CHARLES A
Address: 247 BATTLEGROVE DRIVE
City-St-Zip: DAVENPORT, FL 33837

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: REV. CARL PHILLIPS

SD

03/11/2008

Electronic Signature of Signing Officer or Director

Date