

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004269

FILED
Jan 09, 2009
Secretary of State

Entity Name: UNITED MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

212 N. BARFIELD HWY
PAHOKEE, FL 33476

New Principal Place of Business:

Current Mailing Address:

609 S.W. 11TH ST.
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 65-0816442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, FANNIE M
46 ESSEX COURT
APT-C
ROYAL PALM BEACH, FL 33411 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: M () Delete
Name: BIGGS, KENNETH
Address: 800 MCCLURE ROAD, LOT N
City-St-Zip: PAHOKEE, FL 33476

Title: D () Delete
Name: EASON, MARY
Address: 165 APPLE AVENUE
City-St-Zip: PAHOKEE, FL 33476

Title: S () Delete
Name: HART, FANNIE
Address: 46-C ESSEX CT
City-St-Zip: ROYAL PALM BCH, FL 33411

Title: C () Delete
Name: HART, ROBERT
Address: 609 S.W. 11 ST
City-St-Zip: BELLE GLADE, FL 33430

Title: VP () Delete
Name: LEE, VERSIE
Address: 1424 N.W. F PLACE
City-St-Zip: BELLE GLADE, FL 33430

Title: P () Delete
Name: HART, J T
Address: 10315 SHOWBOAT LANE
City-St-Zip: ROYAL PALM BCH, FL 33411

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: FANNIE M. HART

DR.

01/09/2009

Electronic Signature of Signing Officer or Director

Date