## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005297

FILED May 05, 2008 Secretary of State

Entity Name: GREATER FRIENDSHIP MISSIONARY BAPTIST CHURCH OF FT. PIERCE, INC.

Current Pri	ncipal Place of Business:	New Principal Place of Business:
1221 NORTH 13TH STREET FORT PIERCE, FL 34950		
Current Mailing Address:		New Mailing Address:
3104 AVEN FORT PIER	UE R CE, FL 34947	P. O. BOX 1406 FORT PIERCE, FL 34954
FEI Number: 34-1996759 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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:  Name and Address of New Registered Agent:		
Name and Address of Current Registered Agent.		Name and Address of New Registered Agent.
DONALDSON, LAMAR 3104 AVENUE R FORT PIERCE, FL 34947 US		JOHNSON, RUBIN 3503 JUAN ORTIZ CIRCLE FORT PIERCE, FL 34947 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: RUBIN JOHNSON		05/05/2008
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () Delete BROWN, ISAIAH 3108 KENTUCKY AVE FORT PIERCE, FL 34947	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete ROUSE, GWEN 2409 AVENUE M FORT PIERCE, FL	Title: D (X) Change ( ) Addition Name: NORMAN, PAUL Address: 744 SW ST. CROIX COVE City-St-Zip: PORT ST. LUCIE, FL 34986
	D ( ) Delete FLETCHER, SARA 503 SOUTH 32ND FORT PIERCE, FL	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete LUCAS, IKE 3200 AVENUE R FORT PIERCE, FL 34947	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete PARISH, HENRY 1708 AVENUE N FORT PIERCE, FL	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: RUBIN JOHNSON C 05/05/2008