2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005297

FILED Apr 30, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 1221 NORTH 13TH STREET FORT PIERCE, FL 34950 **Current Mailing Address: New Mailing Address:** 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) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BROWN, ISAIAH PRINCE, GENERETT Name: Name: 3108 KENTUCKY AVE Address: 2301 SAN MARCOS AVENUE Address: City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: FORT PIERCE, FL 34947 Title: Title: () Delete () Change () Addition Name: NORMAN, PAUL Name: Address: 744 SW ST. CROIX COVE Address: City-St-Zip: PORT ST. LUCIE, FL 34986 City-St-Zip: Title: () Delete Title: () Change () Addition FLETCHER, SARA Name: Name: 503 SOUTH 32ND Address: Address: City-St-Zip: FORT PIERCE, FL City-St-Zip: () Delete Title: Title: () Change () Addition LUCAS, IKE Name: Name: 3200 AVENUE R Address: Address: City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: Title: () Delete Title: () Change () Addition PARISH, HENRY Name: Name: 1708 AVENUE N Address: Address: FORT PIERCE, FL City-St-Zip: 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 D 04/30/2009