2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006186

FILED Mar 22, 2009 Secretary of State

Entity Name: CORINTHIANS MISSIONARY BAPTIST CHURCH INC.

New Principal Place of Business: Current Principal Place of Business: 2826 BROADWAY RIVIERA BEACH, FL 33404 **Current Mailing Address: New Mailing Address:** 2826 BROADWAY RIVIERA BEACH, FL 33404 FEI Number: 43-2018913 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SUTTON, CONSTANCE 718 SAN MARCO CIR STE 202 LAKE PARK, FL 33403 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: () Change () Addition () Delete SUTTON, CONSTANCE Name: Name: Address: 718 SAN MARCO CIR STE 202 Address: City-St-Zip: LAKE PARK, FL 33403 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PARRISH, ENGAR D Name: Address: 112 TIMBERAN GASI Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: () Delete Title: (X) Change () Addition MADISON, GLORIA Name: MADISON, GLORIA Name: 4202 B WOODS EDGE CIR 1157 W. 10TH STREET #2 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: RIVIERA BEACH, FL 33404 Title: () Delete Title: () Change () Addition MCCLEOD, SAMUEL Name: Name: Address: 4907 PINEWOOD AVE Address: City-St-Zip: WEST PALM BEACH, FL 33407 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: GLORIA MADISON D 03/22/2009