

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04935

FILED
May 01, 2009
Secretary of State

Entity Name: THE NEW FRIENDSHIP MISSIONARY BAPTIST CHURCH, INCORPORATED

Current Principal Place of Business:

% REV HOSEA L DANIELS
3107 E LAKE AVE
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

% REV HOSEA L DANIELS
3107 E LAKE AVE
TAMPA, FL 33610

New Mailing Address:

FEI Number: 59-2955779 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

DANIELS, HOSEA L
3107 E LAKE AVE
TAMPA, FL 33610 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: PD () Delete
Name: DANIELS, HOSEA L
Address: 3409 N 35TH ST
City-St-Zip: TAMPA, FL 33605

Title: SD () Delete
Name: BRACKINS, NETTIE
Address: 2805 HIGHLAND AVE
City-St-Zip: TAMPA, FL 33602

Title: TD () Delete
Name: HARRIS, MITCHELL
Address: 2214 MASSACHUSETTS
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: CORBETT, SARAH L.
Address: 5102 JOE KING RD
City-St-Zip: PLANT CITY, FL 33567

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: HOSEA L. DANIELS

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date