

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006302

FILED
May 09, 2007
Secretary of State

Entity Name: FAITHFUL FEW MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1771 WEST EDGEWOOD AVENUE
SUITE #6
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1771 WEST EDGEWOOD AVENUE
SUITE #6
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

Name and Address of New Registered Agent:

WALKER, ALFRED B SR.
1517 FOREST HILLS
JACKSONVILLE, FL 32208 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:

Title: PPD () Delete
Name: WALKER, ALFRED B SR.
Address: 1517 FOREST HILLS ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: HIGHSMITH, BENJAMIN
Address: 1165 EAST 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: FORD, RANDOLPH
Address: 2661 UNIVERSITY BLVD, #1105
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ODOM, BETTY
Address: 1771 WEST EDGEWOOD AVENUE, #6
City-St-Zip: JACKSONVILLE, FL 32208

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: ALFRED B. WALKER, SR.

PPD

05/09/2007

Electronic Signature of Signing Officer or Director

Date