

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008723

FILED
Mar 26, 2009
Secretary of State

Entity Name: FULL GOSPEL BUSINESS MEN'S FELLOWSHIP INTERNATIONAL FLORIDA INC.

Current Principal Place of Business:

2598 CARAMBOLA CIRCLE N
COCONUT CREEK, FL 33066 US

New Principal Place of Business:

Current Mailing Address:

2598 CARAMBOLA CIRCLE N
COCONUT CREEK, FL 33066 US

New Mailing Address:

FEI Number: 61-1556114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENEGAS, NICOLAS
2598 CARAMBOLA CIRCLE N.
COCONUT CREEK, FL 33066 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: P () Delete
Name: TOWNSON, GERARDO
Address: 9455 COLLINS AVE. APT. #1001
City-St-Zip: SURFSIDE, FL 33154 US

Title: VP () Delete
Name: VENEGAS, NICOLAS
Address: 2598 CARAMBOLA CIRCLE N.
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: TREA () Delete
Name: TABLADA, CARLOS
Address: 15622 SW 62 TERRACE
City-St-Zip: MIAMI, FL 33193 US

Title: SECR () Delete
Name: MAYES, MARIO
Address: 8199 WHITE ROCK CIR
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MARIO M. MAYES

SECR

03/26/2009

Electronic Signature of Signing Officer or Director

Date