## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20479

FILED Jan 21, 2009 Secretary of State

Entity Name: THE GENERAL ASSEMBLY CHURCH OF THE FIRSTBORN, INC.

Current Principal Place of Business: New Principal Place of Business:

2123 MAINSTREET 2123 MOSES WHITE BLVD. (MAIN STREET)

TAMPA, FL 33607 US TAMPA, FL 33607 US

Current Mailing Address: New Mailing Address:

P.O. BOX 4617

TAMPA, FL 33607 US

FEI Number: 59-2877907 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:

DAVIS, FRANCIS S., SR. 4210 UNION STREET TAMPA, FL 33607 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:

Clashania Oinnahara of Danishara d Anant

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: DAVIS, FRANCIS S., S, R. Name: DAVIS, FRANCIS S., S, R.

 Address:
 4210 UNION STREET
 Address:
 4210 UNION STREET

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL
 33607

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 DAVIS, KATHERINE G
 Name:
 DAVIS, KATHERINE G

 Address:
 4210 UNION ST
 4210 UNION ST
 4210 UNION ST

 City-St-Zip:
 TAMPA, FL
 33607

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:JOHNSON, BARBARA JName:JOHNSON, BARBARA JAddress:3907 E OSBORNE AVEAddress:3907 E OSBORNE AVE

City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PILCHER, RONNIE
 Name:

 Address:
 9904 E FOWLER AVE
 Address:

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:

 Name:
 HUNTER, ALFREDA G
 Name:
 HUNTER, ALFREDA G

 Address:
 3926 CHERRY ST.
 Address:
 3926 CHERRY ST.

 City-St-Zip:
 TAMPA, FL
 33607

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: FRANCIS S. DAVIS, SR. DR 01/21/2009