

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33549

FILED
Jan 31, 2012
Secretary of State

Entity Name: FRIENDSHIP FULL GOSPEL BAPTIST CHURCH OF LAKELAND, INC.

Current Principal Place of Business:

1501 N LINCOLN AVE
LAKELAND, FL 33805 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3645
LAKELAND, FL 33802 US

New Mailing Address:

FEI Number: 59-2957365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMICK, III, JAMES F REV
1501 N LINCOLN AVE
LAKELAND, FL 33805 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: T
Name: TILLMAN, BRENDA Y
Address: 1501 N. LINCOLN AVE.
City-St-Zip: LAKELAND, FL 33805 US

Title: DST
Name: MCCORMICK, VIOLET C
Address: 1501 NORTH LINCOLN AVENUE
City-St-Zip: LAKELAND, FL 33805 US

Title: PDT
Name: MCCORMICK, III, JAMES F REV
Address: 1501 N LINCOLN AVE
City-St-Zip: LAKELAND, FL 33805 US

Title: TD
Name: PRYCE, VIANDRA N
Address: 1501 N. LINCOLN AVENUE
City-St-Zip: LAKELAND, FL 33805 US

Title: T
Name: PRYCE, LESLIE M
Address: 1501 N. LINCOLN AVENUE
City-St-Zip: LAKELAND, FL 33805 US

Title: T
Name: MCGARY, KENYATTA
Address: 1501 N. LINCOLN AVENUE
City-St-Zip: LAKELAND, FL 33805 US

I hereby 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 all other like empowered.

SIGNATURE: VIOLET C. MCCORMICK

DST

01/31/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date