2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# N33600

Entity Name: FRIENDSHIP MISSIONARY BAPTIST CHURCH INC. OF MIAMI

Current Principal Place of Business:

% B.T. SMART
740 N.W. 58 STREET
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

% B.T. SMART
740 N.W. 58 STREET
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-2470063 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMART, B.T.
740 N.W. 58 STREET
MIAMI, FL 33127 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:	VP	( ) Delete
Name:	SMART, B.T.	
Address:	1201 NW LITTLE RIVER DR	
City-St-Zip:	MIAMI, FL 33147	
Title:	T	( ) Delete
Name:	COOFER, REUBEN	
Address:	538 NW 41 STREET	
City-St-Zip:	MIAMI, FL 33127	
Title:	S	( ) Delete
Name:	ROBEISON, S.D.	
Address:	17220 NW 42ND CT	
City-St-Zip:	MIAMI, FL 33055	
Title:	VP	( ) Delete
Name:	WILLIAMS, JOHN	
Address:	3990 NW 171 ST	
City-St-Zip:	OPA LOCKA, FL 33055	
Title:	AT	( ) Delete
Name:	WINGARD-PERCELL, GLENDA	
Address:	1891 SW 148 WAY	
City-St-Zip:	MIRAMAR, FL 33027	
Title:	P	( ) Delete
Name:	SMITH, GASTON E	
Address:	740 N.W. 58 STREET	
City-St-Zip:	MIAMI, FL 33127	

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:	
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: B.T. SMART VP 01/21/2009

Electronic Signature of Signing Officer or Director — Date