

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000131

FILED
May 21, 2007
Secretary of State

Entity Name: FRIENDSHIP MISSIONARY BAPTIST CHURCH, INC. OF ORLANDO

Current Principal Place of Business:

3643 BUNCHE STREET
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

3643 BUNCHE STREET
ORLANDO, FL 32805

New Mailing Address:

P.O. BOX 617545
3643 BUNCHE STREET
ORLANDO, FL 32861

FEI Number: 59-3128673 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

HOLMES, LONNIE
4235 MINOSO ST.
ORLANDO, FL 32811 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: D () Delete
Name: KINSEY, HUEY
Address: 1907 SOUTH RIO GRANDE AVE
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: SLADE, LESSIE
Address: 4845 BETTY SUE TERRACE
City-St-Zip: ORLANDO, FL 32808

Title: CD () Delete
Name: HOLMES, LONNIE
Address: 4235 MINOSO STREET
City-St-Zip: ORLANDO, FL 32811

Title: T () Delete
Name: KIRKLAND, RUDOLPH
Address: 13 CHANNING AVENUE
City-St-Zip: ORLANDO, FL 32811

Title: T () Delete
Name: HENDERSON, VERNELLE
Address: 12102 REBECCAS RUN DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

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: T/S (X) Change () Addition
Name: HENDERSON, VERNELLE
Address: 12102 REBECCAS RUN DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

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: LONNIE HOLMES

C/D

05/21/2007

Electronic Signature of Signing Officer or Director

Date