2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2007 8:00 am
Secretary of State
02-13-2007 90014 042 ****61.25

DOCUMENT # N94000003112

1. Entity Name

FRIENDSHIP COMMUNITY CHURCH, INC.

Principal Place of Business	Mailing Address
~~P.O. BOX 9453~~ ~~TREASURE ISLAND FL 33740~~	P.O. BOX 9453 TREASURE ISLAND FL 33740

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
152 - 107th Ave.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Treasure Island, FL	City & State
Zip: 33706 Country	Zip Country

4. FEI Number: 59-3252653 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HUFFMAN, ANNAMARIE 225 - 104TH AVE #210 TREASURE ISLAND FL 33706	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Annamarie Huffman 2/4/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	~~DP~~ ~~HETRICK, BENJAMIN~~ ~~2805 107TH AVE., APT 409~~ ~~TREASURE ISLAND FL 33706~~	☑ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	DP ~~Lenny Lunn~~ Lunn, Larry 500 - 115th Ave. Treasure Island, 33706	☑ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DI MONDA, DIANE 7210 COQUINA WAY ST PETE BEACH FL 33706	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HUFFMAN, ANNAMARIE 225 104TH AVE #210 TREASURE ISLAND FL 33707	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV KILCHER, JAMES 1308 PASADENA AVE., VILLA 11 S. PASADENA FL 33707	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GRECO, TONY 8468 KING STREET NORTH SEMINOLE FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Annamarie Huffman Annamarie Huffman 2/4/07 2/4/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #