

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 25, 2012
Secretary of State

Entity Name: NEW FRIENDSHIP MISSIONARY BAPTIST CHURCH OF ATLANTIC BEACH, INCORPORATED

Current Principal Place of Business:

1996 MAYPORT RD.
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 330658
ATLANTIC BEACH, FL 322330658 US

New Mailing Address:

FEI Number: 59-3083916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EAKIN, PAUL M
599 ATLANTIC BLVD.
SUITE 4
ATLANTIC BEACH, FL 32233 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: DV
Name: MOORE, CHARLES J DEACON
Address: 2687 COLD CREEK BLVD.
City-St-Zip: JACKSONVILLE, FL 32221

Title: DP
Name: WORTHERLY, CLEMON R DEACON
Address: 2740 GRAYTON CT.
City-St-Zip: JACKSONVILLE, FL 32224

Title: DS
Name: GAINES, JEFFERY T DEACON
Address: 2291 ROCKY BROOK COURT
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: STACKHOUSE, JAMES DEACON
Address: 9716 S. ORR CT.
City-St-Zip: JACKSONVILLE, FL 32246

Title: DT
Name: GRIFFITH, RICARDO DEACON
Address: 333 LAZY MEADOW DR
City-St-Zip: JACKSONVILLE, FL 32225

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: CLEMON R. WORTHERLY

DP

01/25/2012

Electronic Signature of Signing Officer or Director

Date