2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N96000004838

Entity Name: GREATER FRIENDSHIP PRIMITIVE BAPTIST CHURCH, INC.

Current Principal Place of Business:

315 MCARTHUR AVE
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

315 MCARTHUR AVE
SARASOTA, FL 34243

New Mailing Address:

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

Name and Address of Current Registered Agent:

SAMPSON, HUET SR
315 MCARTHUR AVE
SARASOTA, FL 34243

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:	PD	( ) Delete
Name:	SAMPSON, HUET SR	
Address:	315 MCARTHUR AVE	
City-St-Zip:	SARASOTA, FL 34243	
Title:	VD	( ) Delete
Name:	SAMPSON, QUENTIN	
Address:	315 MCARTHUR AVE	
City-St-Zip:	SARASOTA, FL 34243	
Title:	S	( ) Delete
Name:	MITCHELL, BARBARA L	
Address:	3710 9TH ST	
City-St-Zip:	BRADENTON, FL 34208	
Title:	T	( ) Delete
Name:	MITCHELL, JASPER	
Address:	305 12TH ST W	
City-St-Zip:	PALMETTO, FL 34221	
Title:	D	( ) Delete
Name:	MITCHELL, TOM	
Address:	3710 9TH ST E	
City-St-Zip:	BRADENTON, FL 34208	
Title:	T	( ) Delete
Name:	SAMPSON, DOROTHY J	
Address:	315 MCARTHUR AVE	
City-St-Zip:	SARASOTA, FL 34253	

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 for the exemption stated in Section 119.07(3)(i), 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: DOROTHY J SAMPSON T 04/28/2004
Electronic Signature of Signing Officer or Director — Date