2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002072

FILED May 10, 2009 Secretary of State

Entity Name: GREATER FRIENDLY MISSIONARY BAPTIST CHURCH INC.

	rincipal Place of Business:	New Principal Place of Business:
1721 W 19 JACKSON	TH ST VILLE, FL 32209	
Current M	ailing Address:	New Mailing Address:
1721 W 19 JACKSON	TH ST VILLE, FL 32209	
n accordan	59-3452505 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation di Address of Current Registered Agent:	·
MITCHELL 1721 W 19 JACKSON The above	., OSCAR W ITH ST VILLE, FL 32208 US named entity submits this statement for the	ne purpose of changing its registered office or registered agent, or both,
	e of Florida.	
SIGNATUI	RE:	Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name:	T () Delete MITCHELL, OSCAR W	Title: () Change () Addition Name:
	6418 HUGHES ST. JACKSONVILLE, FL 32208	Address: City-St-Zip:
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip:		
City-St-Zip: Fitle: Name: Address:	JACKSONVILLE, FL 32208 T () Delete BOYKIN, EARNEST 1202 W. 12TH ST.	City-St-Zip: Title: T (X) Change () Addition Name: WARRICK, JR., JAMES Address: 7909 COLLINS BAY CT
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	JACKSONVILLE, FL 32208 T () Delete BOYKIN, EARNEST 1202 W. 12TH ST. JACKSONVILLE, FL 32209 T () Delete DOWDELL, BLANCHE 12405 GENTLE BEN CRT	City-St-Zip: Title: T (X) Change () Addition Name: WARRICK, JR., JAMES Address: 7909 COLLINS BAY CT City-St-Zip: JACKSONVILLE, FL 32244 Title: () Change () Addition Name: Address:
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address: Name: Address:	JACKSONVILLE, FL 32208 T () Delete BOYKIN, EARNEST 1202 W. 12TH ST. JACKSONVILLE, FL 32209 T () Delete DOWDELL, BLANCHE 12405 GENTLE BEN CRT JACKSONVILLE, FL 32225 T () Delete GARNER, FANNIE 1965W 9TH ST	City-St-Zip: Title: T (X) Change () Addition Name: WARRICK, JR., JAMES Address: 7909 COLLINS BAY CT City-St-Zip: JACKSONVILLE, FL 32244 Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: OSCAR W. MITCHELL T 05/10/2009