2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001117

FILED Jan 17, 2008 Secretary of State

Entity Name: FIRST MISSIONARY BAPTIST CHURCH OF FERNANDINA BEACH, INC.

Current Principal Place of Business:			New Principal Place of Business:	New Principal Place of Business:		
20 S. 9TH		0.4				
-ERNANL	DINA BCH, FL 320	34				
Current Mailing Address:			New Mailing Address:	New Mailing Address:		
20 S. 9TH FERNAND	ST. DINA BCH, FL 320	34				
El Number	: 59-3501055 F	El Number Applied For()	FEI Number Not Applicable () Certificate of State	us Desired ()		
Name and	d Address of Curr	ent Registered Agent:	Name and Address of New Registered	Agent:		
PAYNE, JAMES 86501 CARTESIAN DR PALM BAY, FL 32907 US			PAYNE, JAMES 86501 CARTESIAN DR YULEE, FL 32097 US	86501 ĆARTESIAN DR		
	e named entity subr e of Florida.	nits this statement for the	ourpose of changing its registered office or registere	d agent, or both,		
SIGNATUI	RE:		01/17/200)8		
	Electronic S	ignature of Registered Ag	ent Date			
OFFICERS AND DIRECTORS:		RS:	ADDITIONS/CHANGES TO OFFICERS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Fitle: Name: Address: City-St-Zip:	CD () Dele PAYNE, JAMES 86501 CARTESIAN YULEE, FL 32097		Title: () Change () Additio Name: Address: City-St-Zip:	n		
Fitle: Name: Address: City-St-Zip:	T () Dele MELTON, AMOS 96113 MT ZION LOO YULEE, FL 32097		Title: () Change () Addition Name: Address: City-St-Zip:	n		
Fitle: Name: Address: City-St-Zip:	T () Dele SCOTT, WILLIE P.O. BOX 169 FERNANDINA BEAC		Title: D (X) Change () Addition Name: BROWN, KEVIN G Address: 86111 FIELDSTONE DRIVE City-St-Zip: YULEE, FL 32097	n		
Title: Name: Nddress: Dity-St-Zip:	T () Dele POLLARD, WILLIE P.O. BOX 16311 FERNANDINA BEAC	JR.	Title: () Change () Additio Name: Address: City-St-Zip:	n		
Fitle: Name: Address: Dity-St-Zip:	T () Dele BROWN, CRAIG 96248 SCOTT ROAI YULEE, FL 32097		Title: () Change () Additio Name: Address: City-St-Zip:	n		
Title:	D () Dele BLUE, ROBERT SR		Title: () Change () Additio Name: Address:	n		

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: JAMES PAYNE TREA 01/17/2008