

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001196

FILED
Mar 10, 2009
Secretary of State

Entity Name: GREATER MOUNT PLEASANT MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

866 W. GOLDEN ST.
TALLAHASSEE, FL 32304

New Principal Place of Business:

866 W. GOLDEN ST.
TALLAHASSEE, FL 32304 US

Current Mailing Address:

866 W. GOLDEN ST.
TALLAHASSEE, FL 32304

New Mailing Address:

866 W. GOLDEN ST.
TALLAHASSEE, FL 32304 US

FEI Number: 59-2685607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, CRAIG REV DR
866 W. GOLDEN ST.
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

RILEY SR, CRAIG REV DR P
866 W. GOLDEN ST.
TALLAHASSEE, FL 32304 US

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: REV. DR. CRAIG P. RILEY, SR.

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DAVIS, CHRISTOPHIE
Address: 2249 UPLAND WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: CD () Delete
Name: RILEY SR, REV DR CRAIG P
Address: 3136 HAWKS LANDING DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: DAVIS, CHRISTOPHE
Address: 2249 UPLAND WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: SFD () Delete
Name: WHITLEY, VANNESSA
Address: 7356 WAGON TR LANE
City-St-Zip: TALLAHASSEE, FL 32310

Title: S () Delete
Name: HUDSON, RETHIA L
Address: 1021 PAUL RUSSELL ROAD
City-St-Zip: TALLAHASSEE, FL 32301

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:

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: RETHIA L. HUDSON

S

03/10/2009

Electronic Signature of Signing Officer or Director

Date