

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002173

FILED  
Feb 05, 2009  
Secretary of State

**Entity Name:** CHIEF CORNERSTONE MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

3125 SOUTH MAIN STREET  
MELBOURNE, FL 32901

**New Principal Place of Business:**

3125 MAIN STREET  
MELBOURNE, FL 32901

**Current Mailing Address:**

3125 SOUTH MAIN STREET  
MELBOURNE, FL 32901

**New Mailing Address:**

3125 MAIN STREET  
MELBOURNE, FL 32901

**FEI Number:** 01-0728572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WASHINGTON, HEATHER  
370 BROOKCREST CIRCLE  
ROCKLEDGE, FL 32955 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: DP ( ) Delete  
Name: WASHINGTON, HEATHER  
Address: 370 BROOKCREST CIRCLE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: DS ( ) Delete  
Name: HOLLOWAY, ROSE  
Address: 931 HOOPER AVE NE  
City-St-Zip: PALM BAY, FL 32905

Title: D ( ) Delete  
Name: MC GOWAN, QUEEN  
Address: 811 DUTCH CT SE  
City-St-Zip: PALM BAY, FL 32909

Title: DT ( ) Delete  
Name: PRESSLEY, WILLIAM  
Address: 805 E UNIVERSITY BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: DV ( ) Delete  
Name: KEY, BETTYE  
Address: 3319 HENRY ST  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: NELEMS, CHARLIE  
Address: 2254 HENRY ST NE  
City-St-Zip: PALM BAY, FL 32905

**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 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: BETTYE J. KEY

DV

02/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date