2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 12, 2009
Secretary of State

DOCUMENT# N98000006125

Entity Name: FAITH MISSIONARY BAPTIST CHURCH OF GAINESVILLE, FL. INC.

Current Principal Place of Business:

2905 SOUTHEAST 21 AVENUE
GAINESVILLE, FL 32641 US

New Principal Place of Business:

Current Mailing Address:

2905 SOUTHEAST 21 AVENUE
GAINESVILLE, FL 32641 US

New Mailing Address:

FEI Number: 59-3535596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THORPE, KEVIN W
5130 SW 81 DRIVE
GAINESVILLE, FL 326085 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:	CHR	(X) Delete
Name:	KLECKLEY, GEORGE	
Address:	311 SOUTHEAST 44TH STREET	
City-St-Zip:	GAINESVILLE, FL 32641	
Title:	D	( ) Delete
Name:	KLECKLEY, ANNETTE	
Address:	311 SOUTHEAST 44TH STREET	
City-St-Zip:	GAINESVILLE, FL 32641	
Title:	D	(X) Delete
Name:	THOMAS, JAMES	
Address:	2905 SE 21AVE	
City-St-Zip:	GAINESVILLE, FL 32641	
Title:	D	(X) Delete
Name:	LANIER, DAYO	
Address:	2905 SE 21AVE	
City-St-Zip:	GAINESVILLE, FL 32641	
Title:	D	( ) Delete
Name:	BROWN, ANTHONY	
Address:	2905 SE 21AVE	
City-St-Zip:	GAINESWVILLE, FL 32641	
Title:	D	(X) Delete
Name:	THOMAS, AGGIE	
Address:	2905 SE 21AVE	
City-St-Zip:	GAINESVILLE, FL 32608	

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: KEVIN THORPE PAST 10/12/2009

Electronic Signature of Signing Officer or Director — Date