

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001775

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** FRIENDSHIP MISSIONARY BAPTIST CHURCH INC.

**Current Principal Place of Business:**

503 MARTIN LUTHE KING ST  
DUNDEE, FL 33838

**New Principal Place of Business:**

503 DR. MARTIN LUTHER KING ST  
DUNDEE, FL 33838

**Current Mailing Address:**

P.O. BOX 1847  
DUNDEE, FL 33838

**New Mailing Address:**

**FEI Number:** 59-2477494      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GUNTER, ROSETTRA  
612 TOWER POINT CIR  
LAKE WALES, FL 33859      US

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

GUNTER, ROSE  
612 TOWER POINT CIR  
LAKE WALES, FL 33859      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: ROSE GUNTER

01/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: BLAND, EDWARD  
Address: 403 RENEE DRIVE  
City-St-Zip: HAINES CITY, FL 33844

Title: S      ( ) Delete  
Name: SHIRLEY, CLINCY  
Address: 210 FLORIDA AVE  
City-St-Zip: DUNDEE, FL 33838

Title: ST      ( ) Delete  
Name: NORMAN, SAMARTIA  
Address: PO BOX 716  
City-St-Zip: DUNDEE, FL 33838

Title: D      ( ) Delete  
Name: BROADERS, LEROY  
Address: 216 JANE AVE  
City-St-Zip: DUNDEE, FL 33838

Title: D      ( ) Delete  
Name: BROOKS, MOSES  
Address: 410 AVENUE O NE  
City-St-Zip: WINTER HAVEN, FL 33881

Title: D      ( ) Delete  
Name: HARDY, GEORGE  
Address: P.O. BOX 472  
City-St-Zip: DUNDEE, FL 33838

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S      (X) Change ( ) Addition  
Name: GUNTER, ROSE  
Address: 612 TOWER POINT CIR  
City-St-Zip: LAKE WALES, FL 33859

Title: ST      (X) Change ( ) Addition  
Name: NORMAN, SAMARTIA  
Address: P.O. BOX 716  
City-St-Zip: DUNDEE, FL 33838

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: EDWARD BLAND

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date