I hereby 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 all other like empowered.

DEACON

SIGNATURE: ELBERT BROWN

Electronic Signature of Signing Officer/Director Detail

Entity Name: FAITH INDEPENDENT MISSIONARY BAPTIST CHURCH, INC

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2805 SILVER LAKE AVE. TAMPA, FL 33614

DOCUMENT# 734922

Current Mailing Address:

2805 SILVER LAKE AVE. TAMPA, FL 33614

FEI Number: 59-2412492

Name and Address of Current Registered Agent:

RILEY, WILLIAM MPASTOR 6224 EMERSON DR NEW PORT RICHEY, FL 34653 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	т	Title	Т
Name	LINDELL, BALDWIN	Name	PARTIN, RON
Address	6726 RALSTON BEACH CIRCLE	Address	2802 N. MORGAN ST
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33602
Title	D	Title	DEACON
Title Name	D BROWN, ELBERT	Title Name	DEACON LODATO, ANDREW
	-		

Certificate of Status Desired: No

FILED Feb 04, 2015 Secretary of State CC9128921920

Date

02/04/2015

Date