

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000001902

**Entity Name:** FRIENDSHIP MISSIONARY BAPTIST CHURCH OF ARCADIA, INC.

**FILED**  
**Jan 20, 2023**  
**Secretary of State**  
**4513043129CC**

**Current Principal Place of Business:**

304 WEST MYRTLE STREET  
ARCADIA, FL 34266

**Current Mailing Address:**

304 WEST MYRTLE STEEET  
ARCADIA, FL 34266 US

**FEI Number: 46-2192097**

**Certificate of Status Desired: No**

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

AMES, ANDREW TCPA,CFP  
128 W OAK STREET  
ARCADIA, FL 34266 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

Date

**Officer/Director Detail :**

Title P  
Name ANDERSON, LOUIS CJR  
Address 23445 NELSON AVENUE  
City-State-Zip: PT CHARLOTTE FL 33954

Title S  
Name CLIFTON, DEBORAH A  
Address 1307 N E OAK STREET  
City-State-Zip: ARCADIA FL 34266

Title T  
Name THOMAS, CAROLYN  
Address 305 N 13TH AVE  
City-State-Zip: ARCADIA FL 34266

Title D  
Name CLIFTON, ROBBIE L  
Address 1303 N E HICKORY STREET  
City-State-Zip: ARCADIA FL 34266

*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.*

**SIGNATURE: CAROLYN THOMAS**

**TREASURER**

**01/20/2023**

Electronic Signature of Signing Officer/Director Detail

Date