

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700934

FILED  
Jul 05, 2008  
Secretary of State

Entity Name: RIVERSIDE BAPTIST CHURCH

**Current Principal Place of Business:**

2650 PARK ST  
JACKSONVILLE, FL 32204 US

**New Principal Place of Business:**

**Current Mailing Address:**

2650 PARK ST  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

FEI Number: 59-0651100      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MOODY, JIM O  
4651 SALISBURY RD  
STE 170  
JACKSONVILLE, FL 32256 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: C      ( ) Delete  
Name: MOODY, JIM O  
Address: 4651 SALISBURY RD STE 170  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: V      ( ) Delete  
Name: MILLER, FRED B JR  
Address: 1840 SEMINOLE ROAD  
City-St-Zip: JACKSONVILLE, FL 322059130 US

Title: STD      ( ) Delete  
Name: BENTON, MARY ANNE  
Address: 1549 BLANDING BLVD  
City-St-Zip: JACKSONVILLE, FL 322101801 US

Title: D      ( ) Delete  
Name: JOHNSON, MARY RUTH  
Address: 1401 CHALLEN AVENUE  
City-St-Zip: JACKSONVILLE, FL 322057809 US

Title: D      ( ) Delete  
Name: CATRETTE, JOANNA  
Address: 5733 PINE AVENUE  
City-St-Zip: ORANGE PARK, FL 320036101 US

Title: D      ( ) Delete  
Name: BAZEMORE, ROBERT  
Address: 4242 ORTEGA BLVD #9  
City-St-Zip: JACKSONVILLE, FL 322106016 US

**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:

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: JIM O. MOODY

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

C

07/05/2008

\_\_\_\_\_ Date