## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

6233 SAN JOSE BOULEVARD

**JACKSONVILLE FL 32217** 

703204

(8)

Mailing Address

6233 SAN JOSE BOULEVARD

JACKSONVILLE FL 32217

SAN JOSE CHURCH OF CHRIST, INC.

## FILED Mar 27 1998 8:00am Secretary of State

3.	Date Incorporated or Qualified 11/16/1961		
4.	FEI Number		Applied For
	59-0839565		Not Applicable
5.	Certificate of Status Desired		\$8.75 Additional Fee Required

2. Principal Place of Business 2a. Mailing Address 5. ( 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes 🔀 No Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes XX No 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WILSON, MICHAEL P Street Address (P.O. Box Number Is Not Acceptable) 6233 SAN JOSE BLVD JACKSONVILLE FL 32217 83 84 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition WILSON, MICHAEL P NAME 1.2 NAME 6233 SAN JOSE BLVD STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE X DELETE 2.1 TITLE Addition Change PRESTAGE, CHARLES NAME 2.2 NAME 6233 SAN JOSE BLVD. STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change Addition YOUNG, JOHN NAME 3.2 NAME 6233 SAN JOSE BLVD STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP XX DELETE TITLE 4.1 TITLE Change Addition GODFREY, HERB NAME 4. 2 NAME 6233 SAN JOSE BLVD STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE TITLE 5.1 TITLE ☐ Change Addition D NAME ROBERT F. WAGNER 5.2 NAME STREET ADDRESS 6233 SAN JOSE BLVD JACKSONVILLE FL 3 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITI F DELETE 6.1 TITLE Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is given and accurate and that my 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 of use the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of users.

Block 12 or Block 13 if changed, or if an accurate accurate accurate and that my name appears in Block 12 or Block 13 if changed, or if an accurate accu

6.2 NAME

6.3 STREET ADDRESS

CICMATUDE.

NAME

STREET ADDRESS

CITY-ST-7IP

V 3-18-98 (God) 712-020