

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003804

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: ALL FOR JESUS COMMUNITY CHURCH, INC.

## Current Principal Place of Business:

2847 WEST 8TH STREET  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

2847 WEST 8TH STREET  
JACKSONVILLE, FL 32254

## Current Mailing Address:

2847 WEST 8TH STREET  
JACKSONVILLE, FL 32205

## New Mailing Address:

FEI Number: 11-3689361      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BROWN, EUNICE M  
2108 PALMDALE STREET  
JACKSONVILLE, FL 32208      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: CLRK      ( ) Delete  
Name: BROWN, BALECIA  
Address: 11501 HARTS ROAD #302  
City-St-Zip: JACKSONVILLE, FL 32218

Title: S      ( ) Delete  
Name: BROWN-BYARD, GLORIA  
Address: 6606 KINLOCK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32219

Title: T      ( ) Delete  
Name: BROWN, EUNICE M  
Address: 2108 PALMDALE STREET  
City-St-Zip: JACKSONVILLE, FL 32208

Title: CLRK      ( ) Delete  
Name: WILLIAMS, LESA  
Address: 8479 RUCKMAN AVENUE  
City-St-Zip: JACKSONVILLE, FL 32221

## 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: CLRK      (X) Change ( ) Addition  
Name: WILLIAMS, LESA  
Address: 8219 SAWMILL CREEK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32244

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EUNICE M. BROWN

T

04/30/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date