


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000004787
 1. Entity Name
GRACE BAPTIST CHURCH OF JACKSONVILLE, INC.



Principal Place of Business Mailing Address
13290 RANCH ROAD **13290 RANCH ROAD**
JACKSONVILLE FL 32218 **JACKSONVILLE FL 32218**



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FCI Number Applied For
59-1581345 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LOGAN, ED
1235 GUM LEAF ROAD
JACKSONVILLE FL 32226

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when coexisting) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		
TITLE	DIR	<input type="checkbox"/> Delete
NAME	BUNTON, HOLLIS	
STREET ADDRESS	402 MINOR ROAD	
CITY-ST-ZIP	YULEE FL 32097	
TITLE	DIR	<input checked="" type="checkbox"/> Delete
NAME	BENTON, TERRY	
STREET ADDRESS	12390 DESOTA STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32218	
TITLE	DIR	<input type="checkbox"/> Delete
NAME	GARNETT, TERRY	
STREET ADDRESS	1319 YELLOW JACKET COURT	
CITY-ST-ZIP	JACKSONVILLE FL 32218	
TITLE	T	<input type="checkbox"/> Delete
NAME	LOGAN, ED	
STREET ADDRESS	1235 GUM LEAF ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32226	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	000000412196	
CITY-ST-ZIP	02/10/06-80037-008 61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE *Edwards E Logan* *Edwards E Logan* 19 November 2006 (904) 927 7757