

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37182

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: PRISONERS OF CHRIST, INC.

**Current Principal Place of Business:**

8373 NORMANDY BLVD  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 28159  
JACKSONVILLE, FL 32226

**New Mailing Address:**

FEI Number: 59-3004784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMER, DANIEL O  
8373 NORMANDY BLVD  
JACKSONVILLE, FL 32221 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: DP ( ) Delete  
Name: PAXSON, WESLEY SR MR  
Address: 801 PONTE VEDRA BLVD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DV ( ) Delete  
Name: GAY, W W  
Address: 524 STOCKTON STREET  
City-St-Zip: JACKSONVILLE, FL 32204

Title: DS ( ) Delete  
Name: TOWERS, CHARLES D JR MR  
Address: 4589 ORTEGA BLVD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: DT ( ) Delete  
Name: SELANDER, GUY T MR  
Address: 2716 VIA BAYA LANE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: DV ( ) Delete  
Name: AUSTIN, ED MR  
Address: 2970 ST JOHNS AVE #6A  
City-St-Zip: JACKSONVILLE, FL 32205

Title: DV ( ) Delete  
Name: PEARCE, FRANK  
Address: 9218 CYPRESS GREEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

**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:

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: WESLEY PAXSON, SR.

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date