

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# N48901

Entity Name: JOSHUA CHRISTIAN FAITH CENTER, INC.

Current Principal Place of Business:

924 ST. CLAIR ST.
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

924 ST. CLAIR ST.
JACKSONVILLE, FL 32254 US

New Mailing Address:

FEI Number: 59-3129826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINKNEY, FREDERIC B PRES
11541 CORAL RIDGE AVE
JACKSONVILLE, FL 32218 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: PT () Delete
Name: PINKNEY, FREDERIC B,
Address: 11541 CORAL RIDGE AVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VT () Delete
Name: PINKNEY, GLORIA H,
Address: 11541 CORAL RIDGE AVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: ST () Delete
Name: CLAYTON, ELAINE,
Address: 3856 FENNGLEN DR
City-St-Zip: JACKSONVILLE, FL

Title: T () Delete
Name: HARRIS, LISA
Address: 11825 WAXBERRY LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: TR () Delete
Name: ADAMS, TERENCE
Address: 8206 BLAZING STAR RD.
City-St-Zip: JACKSONVILLE, FL 32210

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: FREDERIC PINKNEY

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date