## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 737078** 

Entity Name: ST. LUKE'S COMMUNITY CHURCH INC.

**Current Principal Place of Business:** 

3325 PLYMOUTH ST., SUITE 6 JACKSONVILLE. FL 32205

**Current Mailing Address:** 

3325 PLYMOUTH ST., SUITE 6 JACKSONVILLE. FL 32205 US

FEI Number: 59-2424920 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHN, BARBER A 3325 PLYMOUTH ST., SUITE 6 JACKSONVILLE, FL 32205 US

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: JOHN A. BARBER 01/12/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN Title VC

Name VASQUEZ, DEBRA Name ROBERTS, FRANCIS D.

Address 3325 PLYMOUTH ST., SUITE 6 Address 3325 PLYMOUTH ST., SUITE 6

City-State-Zip: JACKSONVILLE FL 32205 City-State-Zip: JACKSONVILLE FL 32205

Title TREASURER Title SECRETARY

Name BIRKS, MANLEY C. Name BIRKS, SUSANNA

Address 3325 PLYMOUTH ST., SUITE 6 Address 3325 PLYMOUTH ST., SUITE 6

City-State-Zip: JACKSONVILLE FL 32205 City-State-Zip: JACKSONVILLE FL 32205

Title PASTOR Title DIRECTOR

Name GARNER, AVERY Name BARBER, JOHN A

Address 3325 PLYMOUTH ST., SUITE 6 Address 3325 PLYMOUTH ST., SUITE 6

City-State-Zip: JACKSONVILLE FL 32205 City-State-Zip: JACKSONVILLE FL 32205

Title DIRECTOR

Name JONES, STEPHEN

Address 3325 PLYMOUTH ST., SUITE 6
City-State-Zip: JACKSONVILLE FL 32205

I hereby 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 all other like empowered.

SIGNATURE: JOHN A. BARBER 01/12/2016

FILED Jan 12, 2016

**Secretary of State** 

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