

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760471

Entity Name: GREATER HARVEST CHRISTIAN FELLOWSHIP OF JACKSONVILLE, INC**Current Principal Place of Business:**9113 RIDGE BLVD
JACKSONVILLE, FL 32208**Current Mailing Address:**9113 RIDGE BLVD
JACKSONVILLE, FL 32208 US**FEI Number: 59-3607438****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEGONS, JOHNNY AREV
2820 HAMILTON CIRCLE
JACKSONVILLE, FL 32209 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	LEGONS, JOHNNY AREV
Address	2820 HAMILTON CIRCLE
City-State-Zip:	JACKSONVILLE FL 32209

Title	VTD
Name	GARY, BUTLER
Address	6844 CHAMPLAIN RD,
City-State-Zip:	JACKSONVILLE FL 32208

Title	D
Name	BRADFORD, CARL
Address	8819 CAMPHOR DRIVE
City-State-Zip:	JACKSONVILLE FL 32208

Title	D
Name	ALEXANDER, LINCOLN BSR
Address	11626 BRIDGES RD
City-State-Zip:	JACKSONVILLE FL 32218

Title	D
Name	GILLEM, THOMAS
Address	3437 TARPON DRIVE
City-State-Zip:	JACKSONVILLE FL 32277

Title	D
Name	HALL, ERNEST SR
Address	2421 LANTANA AVENUE
City-State-Zip:	JACKSONVILLE FL 32209

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: JOHNNY A. LEGONS**SENIOR PASTOR****01/14/2014**

Electronic Signature of Signing Officer/Director Detail

Date