

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760847

Entity Name: FIRST BAPTIST CHURCH OF JACKSONVILLE, FLORIDA INC.**Current Principal Place of Business:**124 WEST ASHLEY STREET
JACKSONVILLE, FL 32202**Current Mailing Address:**124 WEST ASHLEY STREET
JACKSONVILLE, FL 32202**FEI Number:** 59-0823939**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOSKINS, COTY
124 W ASHLEY STREET
JACKSONVILLE, FL 32202 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:** COTY HOSKINS

02/03/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE PASTOR
Name HOSKINS, COTY
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TREASURER
Name HOWARD, RICK
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title ASST. TREASURER
Name BROWNLIE, ED
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name BRISTOWE, DAVE
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name COLLINS, JOE
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title PRESIDENT
Name DAVIDSON, TERRY
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY
Name MORGAN, JONATHAN
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title VP
Name HOLMES, LOCKWOOD
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

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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: COTY HOSKINS

EXECUTIVE PASTOR

02/03/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name JONES, RYAN
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name PICERNO, RICK
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name STALLARD, RILEY
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title SR. PASTOR
Name LAMBERT, HEATH DR.
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name HARRISON, RANDY
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title ASST. TREASURER
Name LUKE, DAVID
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name VAUGHN, JOEY
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title ASST. TREASURER
Name COLEMAN, TODD
Address 124 W ASHLEY ST
City-State-Zip: JACKSONVILLE FL 32202