

**2019 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:**LEVERETTE, JUDSON  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SENIOR EXECUTIVE PASTOR  
Name BLOUNT, JOHN  
Address 124 WEST ASHLEY STREET  
City-State-Zip: JACKSONVILLE FL 32202

Title TREASURER  
Name TUCKER, TYLER  
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 COLEMAN, TODD  
Address 124 WEST ASHLEY STREET  
City-State-Zip: JACKSONVILLE FL 32202

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

Title PRESIDENT  
Name PICERNO, RICK  
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: JOHN BLOUNT****EXECUTIVE PASTOR****03/07/2019**

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

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

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

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

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

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