

2018 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 PRESIDENT
Name BRISTOWE, DAVE
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title ASSISTANT TREASURER
Name MURRAY, RANDY
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 ASST. TREASURER
Name MACARTHUR, JOHN
Address 124 WEST ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title VP
Name PICERNO, RICK
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 BLOUNTSENIOR EXECUTIVE
PASTOR

02/01/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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

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

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