2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002654

Entity Name: THE FIRST BAPTIST ACADEMY OF JACKSONVILLE, INC.

FILED Feb 26, 2021 Secretary of State 8835417092CC

Current Principal Place of Business:

124 WEST ASHLEY STREET JACKSONVILLE. FL 32202

Current Mailing Address:

124 WEST ASHLEY STREET JACKSONVILLE, FL 32202

FEI Number: 26-2880594 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAUGHN, JOSEPH L JR. 2468 ATLANTIC BLVD. JACKSONVILLE, FL 32207 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: JOSEPH L. VAUGHN. JR. 02/26/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	EX OFFICIO	Title	HEAD OF SCHOOL
Name	LAMBERT, HEATH DR.	Name	JOHNSON, SUSAN

Address 124 W. ASHLEY STREET Address 124 WEST ASHLEY STREET

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

TitlePRESIDENTTitleTREASURERNameJONES, RYANNameMARKHAM, PAM

Address 124 WEST ASHLEY STREET Address 124 WEST ASHLEY STREET

City-State-Zip: JACKSONVILLE FL 32202

City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR Title DIRECTOR

Name HOWARD, RICK Name WALLACE, RICKY

Address 124 WEST ASHLEY STREET Address 124 WEST ASHLEY STREET

City-State-Zip: JACKSONVILLE FL 32202

City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR Title DIRECTOR

Name HANSEN, KIMBERLY Name STALLARD, RILEY

Address 124 WEST ASHLEY STREET Address 124 WEST ASHLEY STREET

City-State-Zip: JACKSONVILLE FL 32202

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: SUSAN JOHNSON HEAD OF SCHOOL 02/26/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name HOLT, CHAD

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

Title DIRECTOR
Name VAIL, ROBIN

Address 124 WEST ASHLEY STREET

City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR

Name HOSKINS, COTY

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

Title DIRECTOR
Name HINSON, KATIE

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

Title DIRECTOR
Name HOPF, BILL

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