

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48901

Entity Name: JOSHUA CHRISTIAN FAITH CENTER, INC.

Current Principal Place of Business:

924 ST. CLAIR ST.
JACKSONVILLE, FL 32254

Current Mailing Address:

924 ST. CLAIR ST.
JACKSONVILLE, FL 32254 US

FEI Number: 59-3129826

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PINKNEY, FREDERIC BPRES
5237 CATTLE CROSSING WAY
JACKSONVILLE, FL 32226 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 PT
Name PINKNEY, FREDERIC B
Address 5237 CATTLE CROSSING WAY
City-State-Zip: JACKSONVILLE FL 32226

Title VT
Name PINKNEY, GLORIA H
Address 5237 CATTLE CROSSING WAY
City-State-Zip: JACKSONVILLE FL 32226

Title ST
Name CLAYTON, ELAINE
Address 3856 FERNGLEN DR
City-State-Zip: JACKSONVILLE FL

Title T
Name HARRIS, LISA
Address 11825 WAXBERRY LANE
City-State-Zip: JACKSONVILLE FL 32218

Title TR
Name ADAMS, TERENCE
Address 8206 BLAZING STAR RD.
City-State-Zip: JACKSONVILLE FL 32210

Title FS
Name PINKNEY, SHAYLA A
Address 11541 CORAL RIDGE AVE
City-State-Zip: JACKSONVILLE FL 32218

Title COMMUNITY ADVOCATE
Name MCKIEVER, DORTHY
Address 6234 BERRY DR.
City-State-Zip: JACKSONVILLE FL 32208

Title EDUCATIONAL ADVISOR
Name ROBERTS, ALICE
Address 12301 KERNAN FOREST BLVD BLDG
City-State-Zip: JACKSONVILLE FL 32225

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: FREDERIC PINKNEY

PASTOR & CEO

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date