

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002605

Entity Name: IMPACT CHURCH OF JACKSONVILLE, INC.**Current Principal Place of Business:**8985 LONE STAR RD
JACKSONVILLE, FL 32211**Current Mailing Address:**8985 LONE STAR RD
JACKSONVILLE, FL 32211**FEI Number:** 59-3494560**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JORDAN, RANDALL K
8985 LONE STAR RD
JACKSONVILLE, FL 32211 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:** RANDALL K. JORDAN

04/06/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name DAVIS, GEORGE L
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

Title VD
Name DAVIS, APRIL R
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

Title ST
Name JORDAN, RANDALL
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

Title TRUSTEE
Name WILSON, THOMAS
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

Title TRUSTEE
Name WILLIAMS, CHRISTOPHER
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

Title TRUSTEE
Name COX, ANGELA
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

Title TRUSTEE
Name BAREFIELD, WILLIAM
Address 8985 LONE STAR RD
City-State-Zip: JACKSONVILLE FL 32211

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: RANDALL JORDAN**SECRETARY**

04/06/2020

Electronic Signature of Signing Officer/Director Detail

Date