2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700692

Jul 17, 2007 Secretary of State

Entity Name: FIRST CHRISTIAN CHURCH OF JACKSONVILLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

11924 SAN JOSE BLVD

JACKSONVILLE, FL 32223 US

Current Mailing Address: New Mailing Address:

11924 SAN JOSE BLVD

JACKSONVILLE, FL 32223 US

FEI Number: 59-0689703 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAILEY, SHARON 3270 RICKY ROAD #301 JACKSONVILLE, FL 32223 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete MADIGAN, EMILY WOFFORD, KELLEY Name: Name: Address: 4482 CAROLYN COVE LANE S Address: 5321 FREMONT STREET City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32210

(X) Change () Addition Title: VD () Delete Title:

CURTNER, LINDA Name: Name: MCWHIRTER, CLAUDE

Address: 4926 MANDELLYNN COURT Address: 4757 SECRET HARBOR DRIVE N. City-St-Zip: JACKSONVILLE, FL 32217 US City-St-Zip: JACKSONVILLE, FL 32257 US

Title: () Delete Title: () Change () Addition

BAILEY, SHARON Name: Name: 3270 RICKY RD, #301 Address: Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name: BECKTROM, KRISTOPHER Name: SUGGS, MAURICE 12530 LINJOHN ROAD Address: 10261 LAKE PINE RD Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KELLEY WOFFORD PD 07/17/2007