## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 700692**

FILED Apr 10, 2008 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 ( )

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

DAILEY OLIADON

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

BAILEY, SHARON
10446 AUTUMN TRACE RD.
JACKSONVILLE, FL 32257
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: 04/10/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:PD (X) Change () AdditionName:WOFFORD, KELLEYName:MCWHIRTER, CLAUDEAddress:5321 FREMONT STREETAddress:4757 SECRET HARBOR DRIVE N.City-St-Zip:JACKSONVILLE, FL 32210City-St-Zip:JACKSONVILLE, FL 32257

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

Name:MCWHIRTER, CLAUDEName:JENNINGS, DAVIDAddress:4757 SECRET HARBOR DRIVE N.Address:909 MIDDLERIDGE COURTCity-St-Zip:JACKSONVILLE, FL 32257 USCity-St-Zip:ORANGE PARK, FL 32065 US

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: BAILEY, SHARON Name: WATTS, DAVE

 Address:
 3270 RICKY RD, #301
 Address:
 12327 VALPARISO TRAIL

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:
 JACKSONVILLE, FL 32223

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

 Name:
 SUGGS, MAURICE
 Name:
 BUSCH, SHARON

 Address:
 12530 LINJOHN ROAD
 Address:
 P.O. BOX 24524

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:
 JACKSONVILLE, FL 32241

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: CLAUDE MCWHIRTER PD 04/10/2008