2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700692

FILED Mar 20, 2009 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

Current Mailing Address: New Mailing Address:

US

11924 SAN JOSE BLVD.

JACKSONVILLE, FL 32223 US

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

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

BAILEY, SHARON

10446 AUTUMN TRACE RD.

JACKSONVILLE, FL 32257 US

SMITH, JEFFREY L

2862 SWEETHOLLY DRIVE

JACKSONVILLE, FL 32223

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.

Address:

City-St-Zip:

SIGNATURE: JEFFREY L. SMITH 03/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PD () Delete Title: VPD (X) Change () Addition Name: MCWHIRTER, CLAUDE Name: CALDWELL, FRED Address: 4757 SECRET HARBOR DRIVE N. Address: 1424 BLUE SPRINGS COURT

City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VD () Delete Title: PD (X) Change () Addition Name: JENNINGS, DAVID Name: JENNINGS, DAVID

Address: 909 MIDDLERIDGE COURT Address: 909 MIDDLERIDGE COURT City-St-Zip: ORANGE PARK, FL 32065 US City-St-Zip: ORANGE PARK, FL 32065 US

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

 Name:
 WATTS, DAVE
 Name:
 LANGSTON, ALEX

 Address:
 12327 VALPARISO TRAIL
 Address:
 160 GREEN FIELD DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:
 ST. JOHNS, FL 32259

Title: SD () Delete Title: () Change () Addition
Name: BUSCH, SHARON Name:

BUSCH, SHARON Name:
P.O. BOX 24524 Address:
JACKSONVILLE, FL 32241 City-St-Zip:

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: ALEX LANGSTON T 03/20/2009