## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 704898** 

FILED May 14, 2008 Secretary of State

Entity Name: SAN JOSE BAPTIST CHURCH

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

6140 SAN JOSE BLVD 6140 SAN JOSE BLVD

JACKSONVILLE, FL 322179394 JACKSONVILLE, FL 322172335 US

Current Mailing Address: New Mailing Address:

6140 SAN JOSE BLVD 6140 SAN JOSE BLVD

JACKSONVILLE, FL 322179394 JACKSONVILLE, FL 322172335 US

FEI Number: 59-6020435 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:

LEE, DAWN MS.

6140 SAN JOSE BLVD.

RODON, BARBARA MRS.
6140 SAN JOSE BLVD.

JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32217 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: BARBARA RODON 05/14/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 REED, MICHAEL W REV.
 Name:

 Address:
 6140 SAN JOSE BLVD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32217 US
 City-St-Zip:

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

 Name:
 RODON, ANTHONY MR
 Name:
 HURST, JOHN T MR

 Address:
 6140 SAN JOSE BLVD.
 Address:
 6140 SAN JOSE BLVD.

 City-St-Zip:
 JACKSONVILLE, FL 32217 US
 City-St-Zip:
 JACKSONVILLE, FL 32217 US

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

 Name:
 LEE, DAWN MS
 Name:
 RODON, BARBARA MRS

 Address:
 6140 SAN JOSE BLVD
 6140 SAN JOSE BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32217 US
 City-St-Zip:
 JACKSONVILLE, FL 32217 US

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: MICHAEL W REED PD 05/14/2008