2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# 706202

Entity Name: SAINT MARK'S EVANGELICAL LUTHERAN CHURCH OF JACKSONVILLE, FLORIDA, INC.

Current Principal Place of Business:

CHURCH OF JACKSONVILLE FLORIDA INC
3976 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

New Principal Place of Business:

CHURCH OF JACKSONVILLE FLORIDA INC
3976 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

Current Mailing Address:

3976 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-6018404 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DOW, RICHARD
6491 SMOOTH THORN CT
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	AURAND, LAURIE	
Address:	5778 PARKSTONE CROSSING DR	
City-St-Zip:	JACKSONVILLE, FL 32258	
Title:	VPD	( ) Delete
Name:	BEIGLER, JEFF	
Address:	7213 GLENDYNE DR N	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	S	( ) Delete
Name:	DOIRON, LYNN	
Address:	6317 BAYFIELD DR	
City-St-Zip:	JACKSONVILLE, FL 32277	
Title:	PD	( ) Delete
Name:	CARTER, TED	
Address:	4412 HOOD RD	
City-St-Zip:	JACKSONVILLE, FL 32257	
Title:	S	( ) Delete
Name:	TALLMAN, ROSE	
Address:	11532 TRUXTON CT	
City-St-Zip:	JACKSONVILLE, FL 32223	
Title:	D	(X) Delete
Name:	MITCHELL, JIM	
Address:	2559 BENJAMIN RD	
City-St-Zip:	JACKSONVILLE, FL 32223	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	ZEIGLER, JEFF	
Address:	7213 GLENDYNE DR N	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	COYLE, GINA	
Address:	1053 EMILYS WALK LANE E	
City-St-Zip:	JACKSONVILLE, FL 32221	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: LAURIE AURAND T 04/17/2009

Electronic Signature of Signing Officer or Director — Date