FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

707446

(1)

CHRISTIAN LIFE CHURCH OF JACKSONVILLE, INCORPORA TED

Principal Place of Business Mailing Address

400 CAHOON ROAD

400 CAHOON ROAD

FILED Feb 18 1998 8:00am Secretary of State

- 1 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1
--

400 CAHOON I		400 CAHOON ROAD		3. Date Incorporated or Qualified	
JACKSONVILLE	FL 32220	JACKSONVILLE FL 32220		06/16/1964	
				4. FEI Number	Applied For
				59-1307524	Not Applicable
2. Principal Place of Business		28. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
Suite, Apt #. etc.		Suite, Apt. #, etc.			Fee Required
22		27		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	e e	City & State		7. Is this nonprofit corporation a homeowner	
23		28		Yes [≥ No
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	[25]		30		Yes Who
	9. Name and Address of Curre	nt Registered Agent	- 64 11	10. Name and Address of New Registered	Agent
ĺ			81 Name	TOHN R CARSWELL	
	CARLTON		82 Street A	ddress (P.O. Box Number is Not Acceptable)	
8004 CA	unnon st.				
JACKSO	NVILLE FL 32220		83 247	'I CASSIE ROAD	
			84 City_		85 Zip Code
			1 TA	CKSONULLE FL	85 Zip Code 32221
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statute	s, the above-named o	corporation submits this statement for the purpose of	changing its registered
office or r	egistered agent, or both, in the State or familiar with, and accept #65 oblide	e of Florida, Such change was au	uthorized by the corpo	oration's board of directors. I hereby accept the app	ointment as registered
	Cally Place	vell JOHA		SWELL FEB. 10	1000
SIGNATURE	Signature, typod or printed name of registered ag	print and title if applicable (NOTE	Registered Agent signature in	SWELL FEB. 10, DATE	1776
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAMÉ	CARSWELL, JOHN R.		1.2 NAME		
STREET ADDRESS	8471 CASSIE RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32221		1.4 CITY- ST - ZIP		
TITLE	SD	DELETE	2.1 TITLE		Change Addition
NAME	NOVOCIN, NORB		2.2 NAME		
STREET ADORESS	5015 E LOFTY PINES CIRCL	F	2.3 STREET ADORESS		
CITY-ST-ZIP	JACKSONVILLE FL 32210	-			
TITLE	VPD	DELETE	2 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
		Deterie	•		- Strange - Addition
NAME	JOHNS, CARLTON		3.2 NAME		
STREET ADDRESS	8004 CANNON ST.		3.3 STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE FL 32220	DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE	TD	FT DEFEIG	4.1 TITLE		
NAME	WEAVER, GARY		4. 2 NAME		
STREET ADDRESS	7945 BURMA ROAD		4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32221		4.4 City-st-zip		T-10.
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		
	pertify that the information supplied	with this filing does not qualify for		Lin Section 119 07(3)(i), Florida Statutes, Liurther ce	rtify that the information

In the reby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if changed, or on an attachment with an addition.

MANATURE.

John L Cars

JOHN R. CARSWELL

FEB. D, 1998

781-4455

CHEEKS/ (10/9/)