

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-09-2007 90036 044 ****61.25

DOCUMENT # 708388 1. Entity Name THE HYDE PARK BAPTIST CHURCH OF JACKSONVILLE, INC.					
Principal Place of Business 2000 LANE AVENUE SOUTH JACKSONVILLE FL 32210			Mailing Address 2000 LANE AVENUE SOUTH JACKSONVILLE FL 32210		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1000844	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARSON, M.C. "KIT" James C. McCloskey 1799 SHOAL CREEK CIR. 1634 Sheffield Pl. GREEN COVE SPRINGS FL 32043 Orange Park, FL 32073				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>James C. McCloskey</i> Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when re-registering)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CARSON, M.C. "KIT" 1799 SHOAL CREEK CIR. GREEN COVE SPRINGS FL 32043	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Robert G. Holmes 5712 Knollwood Drive Jacksonville, FL 32244		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S <i>Edward Dorsey</i> DORSEY, EDWARD B 7105 HYDE GROVE AVE JACKSONVILLE FL 32210	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	J <i>James C. McCloskey</i> MCCLOSKEY, JAMES C 1634 SHEFFIELD PL ORANGE PARK FL 32073	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>James C. McCloskey</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				3/27/07 (904) 781-7574 Date Daytime Phone	