2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2006 8:00 am Secretary of State

DOCUMENT # 708491 1. Entity Name THE RIVERSIDE PRESBYTERIAN CHURCH OF JACKSONVILLE, FLORIDA								04-25-200	6 90109 02:	2 ****	70.00	
Principal Place of Business 849 PARK STREET JACKSONVILLE, FL 32204 US Mailing Address 849 PARK STREET JACKSONVILLE, FL 32204					US	•	et i	4000-				
2. Principal Place of Business 3. Ma			3. Mailing Address									
Suite, Apt.	#, etc.	Sui	ite, Apt. #, etc.				04042006	Chg-NP	CR2E037 (11/05)		
City & State		Cit	City & State				4. FEI Numbe 59-0855			-	plied For t Applicable	
Zip	Country	Zip)		Country		5. Certificate	of Status Desired		.75 Add Required		
	6. Name and Address of Curi	rent Registere	d Agent				7. Name and	Address of New F	Registered Age	nt		
						" GILBERT, SHERRICK J.						
MOSELEY, LINDA C 1880 EDGEWOOD AVE. S JACKSONVILLE, FL 32205-9118					Street A	Street Address (P.O. Box Number is Not Acceptable) 3842 REDPOND DRIVE NORTH						
					City	····	····		- 1	Zip Code	•	
The above named entity submits this statement for the purpose of changing its registered					J	JACKSONVILLE FL 32223						
	ions of registered agent.		ose of changing	its regis	stered office o	r registere	ed agent, or bot	h, in the State of Fl	orida. I am fam	iliar with,	and accept	
	I Harrich All	Ment							uhala	,		
SIGNATURE	Signature, typed or printed name of registered		licable. (NOTE: Regis	istered Agent signat	ure required	when reinstating)		<u>4/23/0</u>	6		
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			0 Flankin-	0	F:i				9-les absolues			
	Filing Fee is \$61.25 Due by May 1, 2006		9. Election Trust Fur		gn Financing ibution.		\$5.00 May B	·	flake check pa rida Departme	-		
10.	Due by May 1, 2006 OFFICERS AND	D DIRECTORS	Trust Fur	nd Contri		A	Added to Fees	·	rida Departme	ent of St	ate	
TITLE	OFFICERS AND	D DIRECTORS	Trust Fur	nd Contri	ibution. 11. TITLE	PRES	Added to Fees	FIO.	rida Departme	ent of St	ate	
TITLE NAME	OFFICERS AND V SHEPARD, BRYAN J JR.	D DIRECTORS	Trust Fur	nd Contri	ibution. 11. TITLE NAME	PRES	Added to Fees DDITIONS/CHA	FIO. ANGES TO OFFICE	rida Departme	TORS IN Change	ate 10 Addition	
TITLE	OFFICERS AND		Trust Fur	nd Contri	ibution. 11. TITLE	PRES GILBO	Added to Fees DDITIONS/CHA IDENT FET, SHOW COOPER COOPER	FIO ANGES TO OFFICE PRICK J AD DRIVE	rida Departme	TORS IN	ate 10 Addition	
TITLE NAME STREET ADDRESS	OFFICERS AND V SHEPARD, BRYAN J JR. 1651 BEACH AVE.		Trust Fur	nd Contri	11. TITLE NAME STREET ADDRESS	PRES GILBO 3842 DATA	Added to Fees DDITIONS/CH/ IDENT EXT, SHOOL ADDEO (SONVIULE PRESIDEN	FIGURANGES TO OFFICE RICK J AD DRIVE FL 3122	rida Departme	TORS IN Change	ate 10 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHEPARD, BRYAN J JR. 1651 BEACH AVE. ATLANTIC BEACH, FL 3223 T GILBERT, SHERRICK J		Trust Fur	nd Contri	Dution. 11. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	PRES GILAG 3842 TATA VICE SHIRE	Added to Fees DDITIONS/CH/ IDENT EXT, SHOOL ROCOFO (SONVIULE PRESIDEN LEY BALLE	FIGURES TO OFFICE PRICK J AD DRIVE ,FL 3122 J JOWE	rida Departme	TORS IN Change	10	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

904-880-3026