

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708491

FILED
Apr 10, 2007
Secretary of State

Entity Name: THE RIVERSIDE PRESBYTERIAN CHURCH OF JACKSONVILLE, FLORIDA

Current Principal Place of Business:

849 PARK STREET
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

Current Mailing Address:

849 PARK STREET
JACKSONVILLE, FL 32204 US

New Mailing Address:

FEI Number: 59-0855404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GILBERT, SHERRICK J
3842 REEDPOND DR NORTH
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

PLATT III, HARRY T
4376 ROMA BLVD
JACKSONVILLE, FL 32210 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: HARRY THOMAS PLATT III

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILBERT, SHERRICK J
Address: 3842 REEDPOND DR
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP () Delete
Name: BALLOW, SHIRLEY
Address: 9927 FAWN BROOK DR
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: P () Delete
Name: GILBERT, SHERRICK J
Address: 3842 REED POND DR
City-St-Zip: JACKSONVILLE, FL 322234816 US

Title: T (X) Delete
Name: GITTINAS, ROBERT L
Address: 5137 ARAPAHOE AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: S (X) Delete
Name: LOTZ, JARK
Address: 3917 BUENA VISTA AVE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PLATT III, HARRY T
Address: 4376 ROMA BLVD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP (X) Change () Addition
Name: BALLOWE, SHIRLEY L
Address: 9927 FAWN BROOK DR
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S (X) Change () Addition
Name: WEAVER, KAREN
Address: 4918 PRINCE EDWARD ROAD
City-St-Zip: JACKSONVILLE, FL 32210 US

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 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: HARRY THOMAS PLATT III

P

04/10/2007

Electronic Signature of Signing Officer or Director

Date