2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709462

City-St-Zip:

Apr 29, 2008 Secretary of State

Entity Name: PARKWOOD BAPTIST CHURCH OF JACKSONVILLE, INC. **Current Principal Place of Business: New Principal Place of Business:** 7900 LONE STAR ROAD JACKSONVILLE, FL 32211 **Current Mailing Address: New Mailing Address:** 7900 LONE STAR ROAD JACKSONVILLE, FL 32211 FEI Number: 59-6031676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAUMGARDNER, LARRY HANSEN, RONALD MR 7925 MERRILL ROAD 5569 ALDEN BRIDGE DR US 2508 JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32277 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: RONALD HANSEN 04/29/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition POWERS, BETSY MRS Name: Name: Address: 4480 BAY HARBOUR DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: () Delete Title: () Change () Addition Name: EVANS, ED MR Name: Address: 5473 FT CAROLINE ROAD Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: Title: () Delete Title: (X) Change () Addition TOLBERT, TOM MR Name: SCATES, CLARENCE MR Name: 2435 MILL CREEK RD Address: Address: 4018 HEIDI RD W City-St-Zip: JACKSONVILLE, FL 3211 City-St-Zip: JACKSONVILLE, FL 32277 Title: () Delete Title: () Change () Addition Name: BAUMGARDNER, LARRY MR Name: Address: 7925 MERRILL ROAD APT. 2508 Address: JACKSONVILLE, FL 32277

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.

City-St-Zip:

SIGNATURE: BETSY POWERS S 04/29/2008