

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709462

FILED
Jan 28, 2009
Secretary of State

Entity Name: PARKWOOD BAPTIST CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

7900 LONE STAR ROAD
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

7900 LONE STAR ROAD
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-6031676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSEN, RONALD MR
5569 ALDEN BRIDGE DR
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

CHRISTOFFERSEN, CRAIG MR
1032 PARKRIDGE CIR W
JACKSONVILLE, FL 32211 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: MR CRAIG CHRISTOFFERSEN

01/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: POWERS, BETSY MRS
Address: 4480 BAY HARBOUR DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: T () Delete
Name: EVANS, ED MR
Address: 5473 FT CAROLINE ROAD
City-St-Zip: JACKSONVILLE, FL 32277

Title: V () Delete
Name: SCATES, CLARENCE MR
Address: 4018 HEIDI RD W
City-St-Zip: JACKSONVILLE, FL 32277

Title: P () Delete
Name: BAUMGARDNER, LARRY MR
Address: 7925 MERRILL ROAD APT. 2508
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: HORNE, H.J. MR
Address: 1441 ARLINGWOOD AVE
City-St-Zip: JACKSONVILLE, FL 32211

Title: P (X) Change () Addition
Name: SCATES, CLARENCE MR
Address: 4018 HEIDI RD W
City-St-Zip: JACKSONVILLE, FL 32277

Title: V (X) Change () Addition
Name: WILLIAMSON, DAVID MR
Address: 5473 HICKORY GROVE DR
City-St-Zip: 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.

SIGNATURE: MR CLARENCE SCATES

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date