


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 714530</b> 1. Entity Name <b>JACKSONVILLE FULL GOSPEL FELLOWSHIP, INC.</b>	
--	---

Principal Place of Business <b>2323 EDGEWOOD AVE., NORTH JACKSONVILLE, FL 32205</b>	Mailing Address <b>1253 SORRELLS CT JACKSONVILLE, FL 32221 US</b>
--	--

DO NOT WRITE IN THIS SPACE



01032007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>23-7303094</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>CONWELL, CHRIS E. 1253 SORRELLS CT JACKSONVILLE, FL 32221</b>
---

DO NOT WRITE  
IN THIS SPACE

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TAYLOR, R A 1251 SORRELLS CT JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CONWELL, MARCEL T 1253 SORRELLS CT JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CONWELL, CHRIS E. 1253 SORRELLS CT JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000578657  
01/08/07-80038-004 61.25

DO NOT WRITE  
IN THIS SPACE

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:** Chris E. Conwell **Chris E. Conwell** Jan. 3, 2007 (904) 786-0897

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #