

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # 715827

1. Entity Name

**CHRIST SANCTIFIED HOLY CHURCH OF
JACKSONVILLE, INC.**



Principal Place of Business

**1820 SOUTH SIDE BLVD
JACKSONVILLE FL 32216-1928**

Mailing Address

**1820 SOUTH SIDE BLVD
JACKSONVILLE FL 32216-1928**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-6014581

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COLLIER, ELWOOD T
8233 FT CAROLINE ROAD
JACKSONVILLE FL 32277**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME COLLIER, ELWOOD T
STREET ADDRESS 8233 FT CAROLINE RD
CITY-ST-ZIP JACKSONVILLE FL

TITLE VD ☐ Delete
NAME COLLIER, CHARLOTTE GRAY
STREET ADDRESS 8233 FT CAROLINE RD
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE D ☐ Delete
NAME COLLIER, CHARLES E
STREET ADDRESS 4452 BAY HARBOUR DR
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ Delete
NAME COLLIER, JR, ELWOOD T
STREET ADDRESS 673C PONTE VEDRA BLVD.
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE VD ☐ Delete
NAME COLLIER, CHARLOTTE GRAY
STREET ADDRESS 8233 FT. CAROLINE RD.
CITY-ST-ZIP JACKSONVILLE FL 32277

TITLE SD ☐ Delete
NAME TEMPLE, CHARLOTTE
STREET ADDRESS 11106 SAIL POINT LANE
CITY-ST-ZIP JACKSONVILLE FL 32225

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
000000656298
03/14/07-80019-014 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Elwood T. Collier* **ELWOOD T. COLLIER** 3-1-07 904-744-0361