

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719891

FILED
Jan 09, 2006
Secretary of State

Entity Name: FLORIDA CHRISTIAN APARTMENTS, INC.

Current Principal Place of Business:

1115 S. EDGEWOOD AVENUE
JACKSONVILLE, FL 32205

New Principal Place of Business:

1115 S. EDGEWOOD AVENUE
JACKSONVILLE, FL 32205 US

Current Mailing Address:

1115 S. EDGEWOOD AVENUE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-1737422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: MURRY, RODGER L
Address: 5319 SECLUDED OAKS LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: P () Delete
Name: HULL, RICHARD J JR.
Address: 2841 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP () Delete
Name: GEE, KAREY E .L.
Address: 2530 JACONA DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: T () Delete
Name: EDDIE, SHEREE L
Address: 10755 GRAYBORO STREET
City-St-Zip: JACKSONVILLE, FL 32020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RICHARD HULL

PRES

01/09/2006

Electronic Signature of Signing Officer or Director

Date