

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719891

FILED
Apr 12, 2011
Secretary of State

Entity Name: FLORIDA CHRISTIAN APARTMENTS, INC.

Current Principal Place of Business:

1115 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205 US

New Principal Place of Business:

Current Mailing Address:

1115 EDGEWOOD AVENUE SOUTH
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:

LEGEER, LISA P
1615 ABERDEEN STREET
JACKSONVILLE, FL 32205 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: P
Name: LEGEER, LISA
Address: 1615 ABERDEEN STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP
Name: SMITH, JEFFREY L
Address: 11924 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32223

Title: S
Name: HULL II, RICHARD J REV
Address: 3591 HEDRICK STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: T
Name: EDDIE, SHEREE
Address: 10755 GRAYSON STREET
City-St-Zip: JACKSONVILLE, FL 32220

Title: D
Name: MURRAY, RODGER L
Address: 5319 SECLUDED OAKS LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: BROOKS, SARA REV
Address: 13690 W.M. DAVIS PARKWAY W
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

SIGNATURE: LISA LEGEER

P

04/12/2011

Electronic Signature of Signing Officer or Director

Date