## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#719891** 

FILED Apr 04, 2012 Secretary of State

Entity Name: FLORIDA CHRISTIAN APARTMENTS, INC.

Current Principal Place of Business: New Principal Place of Business:

1115 EDGEWOOD AVENUE SOUTH JACKSONVILLE, FL 32205 US

Current Mailing Address: New Mailing Address:

1115 EDGEWOOD AVENUE SOUTH JACKSONVILLE, FL 32205

FEI Number: 59-1737422 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEGEER, LISA P 1615 ABERDEEN STREET JACKSONVILLE, FL 32205 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: LEGEER, LISA

Address: 1615 ABERDEEN STREET City-St-Zip: JACKSONVILLE, FL 32205

Title: VP

Name: BUELL, ARTHUR

Address: 4544 MIDDLETON PARK CIRCLE W

City-St-Zip: JACKSONVILLE, FL 32224

Title: T

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

Title: D

Name: OUGHTON, PRESTON

Address: 10365 HOOD RD S, SUITE 204 City-St-Zip: JACKSONVILLE, FL 322257

Title:

 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 04/04/2012