2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2004 08:00 AM
Secretary of State

DOCUMENT # 725481

1. Entity Name
HENDRICKS AVENUE BAPTIST CHURCH

Principal Place of Business	Mailing Address
4001 HENDRICKS AVENUE JACKSONVILLE, FL 32207 US	4001 HENDRICKS AVENUE JACKSONVILLE, FL 32207 US

02202004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0711173
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEYERS, KENNETH J
8975 SAN RAE RD.
JACKSONVILLE, FL 32257

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000064394
02/24/04-80011-006 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GREEN, HUGH
STREET ADDRESS	3939 CORDOVA AVE
CITY-ST-ZIP	JACKSONVILLE, FL 32207
TITLE	D
NAME	CARTER, ANN
STREET ADDRESS	1122 MIRAMAR AVE
CITY-ST-ZIP	JACKSONVILLE, FL 32207
TITLE	D
NAME	FINDLEY, VICKY
STREET ADDRESS	9484 BEAUCLERC COVE LN
CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	AP
NAME	MEYERS, KENNETH J
STREET ADDRESS	8975 SAN RAE RD
CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	S
NAME	FAUSS, CAROLE C
STREET ADDRESS	2470 CASTELLON DR. NO
CITY-ST-ZIP	JACKSONVILLE, FL 32217
TITLE	T
NAME	O'NEAL, DOUGLAS T
STREET ADDRESS	6730 EPPING FOREST WAY N. VILLA 104
CITY-ST-ZIP	JACKSONVILLE, FL 32217

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Kenneth J Meyers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #