

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726860

FILED
Jan 10, 2006
Secretary of State

Entity Name: CHRISTIAN FAMILY CHAPEL OF JACKSONVILLE, FLORIDA, INC.

Current Principal Place of Business:

10365 OLD ST. AUGUSTINE ROAD
JACKSONVILLE, FL 322576419

New Principal Place of Business:

Current Mailing Address:

10365 OLD ST. AUGUSTINE ROAD
JACKSONVILLE, FL 322576419

New Mailing Address:

FEI Number: 59-1510448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

W.A. HARMON
4349 WORTH DR. W.
JACKSONVILLE, FL 32207 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: D () Delete
Name: WEAVER, W. FROST
Address: 8735 BATTEN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D () Delete
Name: ALLEN, JOHN
Address: 4399 PHILLIPS PLACE
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD () Delete
Name: LUSK, TIM
Address: 710 WINFRED DR. N.
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: FELTEN, JERRY
Address: 4835 EMPIRE AVE.
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD () Delete
Name: RAINNIE, WARD
Address: 4304 FALLING LEAF CT.
City-St-Zip: JACKSONVILLE, FL 32258

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:

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: W. A. HARMON

P

01/10/2006

Electronic Signature of Signing Officer or Director

Date