

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748758

FILED
Apr 24, 2006
Secretary of State

Entity Name: FIRST UNITED PENTECOSTAL CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

11697 NORMANDY BLVD.
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

11697 NORMANDY BLVD.
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 59-2611053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, LESTER J
11697-4 NORMANDY BLVD
JACKSONVILLE, FL 32221 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: PD () Delete
Name: GREEN, LESTER J
Address: 11697-4 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL 32221

Title: VD () Delete
Name: MONDAY, FORREST L SR.
Address: 1915 DAYTON CIRCLE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: BECK, DAVID L
Address: 6926 CHERBOURG AVE., N.
City-St-Zip: JACKSONVILLE, FL 32205

Title: S () Delete
Name: MONDAY, JEAN
Address: 1915 DAYTON CIRCLE
City-St-Zip: JACKSONVILLE, FL 32210

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: LESTER J. GREEN

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date