

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 760471

1. Entity Name
BEVERLY HILLS CHURCH OF GOD, INC.



Principal Place of Business

9113 RIDGE BLVD
JACKSONVILLE, FL 32208 US

Mailing Address

9113 RIDGE BLVD
JACKSONVILLE, FL 32208 US

FILED
Jul 18, 2008 08:00 AM
Secretary of State



07082008 No Chg-NP CR2E037 (4/08)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3607438

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEGONS, JOHNNY A REV
2820 HAMILTON CIRCLE
JACKSONVILLE, FL 32209

**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 September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LEGONS, JOHNNY A REV
STREET ADDRESS 2820 HAMILTON CIRCLE
CITY-ST-ZIP JACKSONVILLE, FL 32209

TITLE VTD
NAME SPANN, WILLIE
STREET ADDRESS 2573 MINOSA CIRCLE
CITY-ST-ZIP JACKSONVILLE, FL 32209

TITLE D
NAME BRADFORD, CARL
STREET ADDRESS 8819 CAMPHOR DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32208

TITLE D
NAME ALEXANDER, LINCOLN B SR
STREET ADDRESS 11826 BRIDGES RD
CITY-ST-ZIP JACKSONVILLE, FL 32218

TITLE D
NAME GILLEM, THOMAS
STREET ADDRESS 3437 TARPON DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32277

TITLE D
NAME HALL, ERNEST SR
STREET ADDRESS 2421 LANTANA AVENUE
CITY-ST-ZIP JACKSONVILLE, FL 32209

U000000955545
07/18/08-80002-007 70.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Johnny A. Legons, Senior Pastor

7-11-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #