

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761718

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** THE GREAT COMMISSION, INC.

**Current Principal Place of Business:**

5400 LA MOYA AVE.  
#7  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 37893  
JACKSONVILLE, FL 32236 US

**New Mailing Address:**

**FEI Number:** 59-2252633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DORGBADZI, PATRICIA A  
5400 LA MOYA AVE. #7  
JACKSONVILLE, FL 32210 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  
Name: DORGBADZI, PATRICIA A  
Address: 5400 LA MOYA AVE #7  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D  
Name: JOHNS, FRANCES  
Address: 71 PEREGRINE CROSSING  
City-St-Zip: SAVANNAH, GA 31411

Title: D  
Name: SMITH, CRAIG  
Address: 15505 E TELEGRAPH DR  
City-St-Zip: FOUNTAIN HILLS, AZ 85268

Title: S  
Name: CARTER, VICKY  
Address: 3968 PACKARD DRIVE  
City-St-Zip: JACKSONVILLE, FL 32246

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: PATRICIA ANN DORGBADZI

PD

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date