2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#763210

FILED Apr 17, 2009 Secretary of State

Entity Name: ST. JOSEPH MISSIONARY BAPTIST CHURCH, INC. OF JACKSONVILLE

Current Principal Place of Business: New Principal Place of Business: 485 W. FIRST STREET JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** 485 W. FIRST STREET JACKSONVILLE, FL 32202 FEI Number: 59-2224556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RHIM, HENRT Y REV RHIM, HENRT T REV 2968 BREVE DRIVE 2968 BREVE DRIVE JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32209 US US 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: HENRY T. RHIM 04/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ALIEN, WALTER Name: Name: 5658 PINE FOREST DR Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: Title: () Delete Title: () Change () Addition JAMES, DENNIS Name: Name: Address: 11402 RIVER KNOLL DR Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: () Delete Title: () Change () Addition BACON, DARRELL Name: Name: 9531 WARHAWK RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RANDOLPH, MAURY Name: 9515 WAYNESBORO AVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: Title: () Delete Title: (X) Change () Addition MURRAY, EUGENE SMITH, RALPH Name: Name: 11542 CORAL RIDGE AVE 6506 THURGOOD CIRCLE WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32219 Title: () Delete Title: (X) Change () Addition SAVAGE, MARION W HACKLEY, WILLIE D Name: Name: Address: 5721 BRAIT AVE Address: 9341 THOMAS DUKES COURT JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32219 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RALPH SMITH D 04/17/2009