2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2010
Secretary of State

DOCUMENT# N00000003238

Entity Name: CONSUMING FIRE MINISTRIES OF JACKSONVILLE, INC.

Current Principal Place of Business:

5123-03 TIMUQUANA RD
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

10198 MEADOW POINT DR
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 59-3646567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUMMERS, TONYA R
10198 MEADOW POINTE DR.
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: CPT
Name: SUMMERS, TONYA
Address: 10198 MEADOW POINT DRIVE
City-St-Zip: JACKSONVILLE, FL 32221

Title: D
Name: GUERRERO, LUIS
Address: 7349 IRONSIDE DR. E.
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP/M
Name: CRUSE, GERALD P
Address: 10198 MEADOW POINTE DR
City-St-Zip: JACKSONVILLE, FL 32221

Title: D
Name: KATO, GREGORY
Address: 6941 CAVALIER RD
City-St-Zip: JACKSONVILLE, FL 32208

Title: D
Name: BRACY, RANDOLPH REV.
Address: 5315 WOODSTEAD WAY
City-St-Zip: ORLANDO, FL 32819

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: TONYA SUMMERS CPT 02/16/2010

Electronic Signature of Signing Officer or Director Date