## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000003674

FILED Mar 28, 2007 Secretary of State

Entity Name: NORTH JACKSONVILLE FAMILY WORSHIP CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 10224 LEM TURNER RD JACKSONVILLE, FL 32218 **Current Mailing Address: New Mailing Address:** P.O. BOX 26304 JACKSONVILLE, FL 32218 US FEI Number: 59-3650687 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: BING, LEON R 11705 CHERRY BARK DR E JACKSONVILLE, FL 322180000 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BING, LEON R Name: Name: 11705 CHERRY BARK DRIVE E Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: BING, JANICE M Name: Address: 11705 CHERRY BARK DRIVE E Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: Title: () Delete Title: () Change () Addition MILLER, L. C Name: Name: 2538 GAYLAND ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: THOMAS, DORIS M Name: Address: 2531 PETUNIA STREET Address: City-St-Zip: JACKSONVILLE, FL 32209 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition JOHNSON, FATIMA C Name: Name: 1953 RUGBY ROAD Address: Address: JACKSONVILLE, FL 32208 US City-St-Zip: 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: LEON R. BING PRES 03/28/2007