

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003955

FILED
Jan 26, 2007
Secretary of State

Entity Name: THE SOUTHSIDE CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

2179 EMERSON STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

2179 EMERSON STREET
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-2369361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, EDWARD REV.
12308 FLYNN WOODS ROAD
JACKSONVILLE, FL 32223 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: CD () Delete
Name: ROBINSON, EDWARD SR.
Address: 12308 FLYNN WOOD RD.
City-St-Zip: JACKSONVILLE, FL 32223

Title: VCD () Delete
Name: FERRELL, MARVIN
Address: 4039 MISSION HILLS CIR W
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD () Delete
Name: ROBINSON, GEORGE
Address: 2225 BRIDO ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD () Delete
Name: WILLIAMS, GLYNDA
Address: PO BOX 47501
City-St-Zip: JACKSONVILLE, FL 32247

Title: D () Delete
Name: EDWARDS, MARJORIE
Address: 3031 REDMOND AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: VCD () Delete
Name: DIXON, WILLIE F
Address: 2409 JOHNSON AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: THOMAS, ILENE
Address: 3770 TOLEDO ROAD #9
City-St-Zip: JACKSONVILLE, FL 32216

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: REV. EDWARD ROBINSON

CD

01/26/2007

Electronic Signature of Signing Officer or Director

Date