2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000080

Entity Name: CHRIST CHURCH OF PEACE, INCORPORATED

FILED May 06, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1240 MCDUFF AVENUE SOUTH JACKSONVILLE, FL 322058030 US

Current Mailing Address: New Mailing Address:

1240 MCDUFF AVENUE SOUTH JACKSONVILLE, FL 322058030 US

FEI Number: 59-3693733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

NICOL, GORDON T ESQ
7545 CENTURION PARKWAY
SUITE 108
JACKSONVILLE, FL 322564118 US
POUCHER, JR., ALLEN L P.A.
2257 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204 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: ALLEN L. POUCHER, JR. 05/06/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DVP () Delete Title: DP (X) Change () Addition

Name:KIMBALL, PATRICKName:JACKSON, LARRY RAddress:2358 RIVERSIDE AVENUE, APT. #504Address:2598 HERSCHEL STREETCity-St-Zip:JACKSONVILLE, FL 32204City-St-Zip:JACKSONVILLE, FL 32204

Title: DP () Delete Title: DVP (X) Change () Addition

 Name:
 SHACKELFORD, MARY A
 Name:
 WILLIAMSON, TERESA

 Address:
 212 METZ STREET
 Address:
 9847 STAPLE INN COURT

 City-St-Zip:
 JACKSONVILLE, FL 322117829
 City-St-Zip:
 JACKSONVILLE, FL 32221

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 DEAN, RAYMOND W
 Name:
 MACKIN, JOHN M

 Address:
 14088 MT. PLEASANT RD.
 Address:
 3559 ERNEST STREET

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32205

 $\label{eq:title:DS} {\it Title:} \qquad {\it DS} \qquad (\) \ {\it Delete} \qquad \qquad {\it Title:} \qquad {\it DS} \qquad (\it X) \ {\it Change} \ (\) \ {\it Addition}$

Name: SOLOMON, AARON Name: JOSEPH, JONATHAN

 Address:
 731 OAKS FIELD ROAD
 Address:
 1171 LANE AVENUE SOUTH #1306

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:
 JACKSONVILLE, FL 32205

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: LARRY R. JACKSON DP 05/06/2009