2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# N01000000404

Entity Name: FIRST AFRICAN COMMUNITY CHURCH OF JACKSONVILLE, FL INC.

Current Principal Place of Business:

PO BOX 52293
JACKSONVILLE, FL 322012293

New Principal Place of Business:

Current Mailing Address:

PO BOX 52293
JACKSONVILLE, FL 322012293

New Mailing Address:

FEI Number: 59-3693327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KARR, NAPOLEON R
1622 LESSARD CIR.
JACKSONVILLE, FL 32208 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: PD ( ) Delete
Name: KARR, NAPOLEON R
Address: 1622 LESSARD CIR
City-St-Zip: JACKSONVILLE, FL 32208

Title: T ( ) Delete
Name: KARR, KATHLEEN
Address: 1622 LESSARD CIR
City-St-Zip: JAKCOSONVILLE, FL 32208

Title: T ( ) Delete
Name: YEAWOLO, JOSEPH S
Address: 2616 BYWORD LN
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: KARR, KATHLEEN
Address: 1622 LESSARD CIR
City-St-Zip: JAKCOSONVILLE, FL 32208

Title: T (X) Change ( ) Addition
Name: MOMORIE, KUMBA
Address: 3400 TOWNSEND BLVD
City-St-Zip: JACKSONVILLE, FL 32277

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: NAPOLEON R KARR PD 04/26/2006

Electronic Signature of Signing Officer or Director — Date