2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008
Secretary of State

DOCUMENT# N01000000894

Entity Name: FAMILY PROMISE OF JACKSONVILLE INC.

Current Principal Place of Business:	**New Principal Place of Business:**
225 E DUVAL ST JACKSONVILLE, FL 32202	

Current Mailing Address:	**New Mailing Address:**
P O BOX 8669 JACKSONVILLE, FL 32239	P O BOX 40363 JACKSONVILLE, FL 32203 US

FEI Number: 59-3685470   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:**
REID, GAYLE 8264 LONE STAR ROAD JACKSONVILLE, FL 32211 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:

OFFICERS AND DIRECTORS:

Title: DP   ( ) Delete
Name: WALKER, FREDDIE
Address: 4632 PRINCE EDWARD RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: DT   ( ) Delete
Name: ISGETTE, HAROLD
Address: 11659 MARSH ELDER DR
City-St-Zip: JACKSONVILLE, FL 32226

Title: DS   ( ) Delete
Name: PETRY, MARY
Address: 6921 MCMULLIN ST
City-St-Zip: JACKSONVILLE, FL 322102760 US

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:

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: HAROLD ISGETTE JR   DT   02/01/2008

Electronic Signature of Signing Officer or Director   Date