2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001148

FILED Apr 04, 2008 Secretary of State

Entity Name: MURCHISON TEMPLE CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

5817 CATOMA ST

JACKSONVILLE, FL 32244

Current Mailing Address: New Mailing Address:

4243 WOODLEY CREEK RD 11351 MANATEE DR

JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218

FEI Number: 59-3702769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SIMMONS, LIZZIE M MCKINNEY, MARY C 4243 WOÓDLEY CREEK RD 11351 MANATEE DR

JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218 US 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: MARY C. MCKINNEY 04/04/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PPAS PAST () Delete (X) Change () Addition

SIMMONS, LIZZIE M MCKINNEY, MARY C Name: Name: 4243 WOODLEY CREEK RD Address: 11351 MANATEE DR Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218

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

JENNINGS, WILLIAM Name: ANDERSON, MRS Name:

Address: 1210 W 10TH ST Address: 5915-2 LINKS NOTCH LANE City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32221

Title: TTRE () Delete Title: **TREA** (X) Change () Addition

WILLIAMS, ELAINE WILLIAMS, ELAINE Name: Name: Address: 345 PHELPS ST Address: 345 PHELPS ST

JACKSONVILLE, FL 32206 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32206

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

Name: Name: PITTS, SHANTELL 4611 PEARL STREET Address: Address:

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32206 US

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

PITTS, JOHN Name: Name: 4611 PEARL STREET Address: Address: JACKSONVILLE, FL 32206 US City-St-Zip: 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: MARY C. MCKINNEY PAST 04/04/2008