

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006269

FILED
Apr 30, 2009
Secretary of State

Entity Name: ST. LAWRENCE COMMUNITY CHURCH INCORPORATED

Current Principal Place of Business:

4881 CLYDE DRIVE
JACKSONVILLE, FL

New Principal Place of Business:

4881 CLYDE DRIVE
JACKSONVILLE, FL 32208

Current Mailing Address:

4881 CLYDE DRIVE
JACKSONVILLE, FL

New Mailing Address:

4881 CLYDE DRIVE
JACKSONVILLE, FL 32208

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EASTON, SYLVESTER L SR
8804 JASPER AVE
JACKSONVILLE, FL 32211 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: EASTON, SYLVESTER SR.
Address: 8804 JASPER AVE.
City-St-Zip: JACKSONVILLE, FL 32211

Title: S () Delete
Name: EASTON, LORETTA J
Address: 8804 JASPER AVE.
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SYLVESTER L. EASTON SR.

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date