


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90114 050 ****61.25

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|--|---|--|--|--|--|
| DOCUMENT # N01087 1. Entity Name UNITY CHURCH FOR CREATIVE LIVING, INC. | | | |  | |
| Principal Place of Business 2777 RACE TRACK RD JACKSONVILLE, FL 32259 US | | | Mailing Address 2777 RACE TRACK RD JACKSONVILLE, FL 32259 US | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 59-2376181 | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent HENDERSON, REESE J 707 PENINSULAR PLACE JACKSONVILLE, FL 32204 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| Make check payable to: Florida Department of State | | 10. OFFICERS AND DIRECTORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP SIVER, CURTIS 829 E. DOTY BRANCH LANE JACKSONVILLE, FL 32259 | | <input checked="" type="checkbox"/> Delete | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DTR NOWICKI, DAVID 1536 GREEN RIDGE CIR W JACKSONVILLE, FL 32259 | | <input checked="" type="checkbox"/> Delete | D Elia, Rev. Judith 6146 Bartram Village Dr. Jacksonville, FL 32258 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DTR ALDRIDGE, BEVERLY 1034 NATURES HAMMOCK RD. S. JACKSONVILLE, FL 32260 | | <input checked="" type="checkbox"/> Delete | T Thompson, Denise 305 West Kari Court Jacksonville, FL 32259 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DTR BROOK, HELENA 5331 SHORECREST DR. JACKSONVILLE, FL 32210 | | <input type="checkbox"/> Delete | D/V Payne, Meredith 558 Johns Creek Parkway St. Augustine, FL 32260 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DTR LAWSON, RICHARD 2515 EMPERIOR DR. JACKSONVILLE, FL 32223 | | <input type="checkbox"/> Delete | S | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV BOARDMAN, ED 2335 HAWKEREST DR. E. JACKSONVILLE, FL 32259 | | <input type="checkbox"/> Delete | D/P | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: <i>Judith Elia</i> | | | | Date: 4-15-08 Daytime Phone #: 904-287-1505 | |

ATTACHMENT

40080101

Additional page to Doc # N01087:

Block 11:

~~X~~ Addition

T

Velazquez, Mayra
10811 High Ridge Road
Jacksonville, FL 32225