

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2009
Secretary of State**

DOCUMENT# N02000008832

Entity Name: FIRST COAST CHRISTIAN OUTREACH, INC.

Current Principal Place of Business:

1452 SAN AMARO ROAD
JACKSONVILLE, FL 322077529

New Principal Place of Business:

Current Mailing Address:

PO BOX 5765
JACKSONVILLE, FL 322475765

New Mailing Address:

FEI Number: 52-2391412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHURCH, WILLIAM P
1452 SAN AMARO ROAD
JACKSONVILLE, FL 322077529 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: D () Delete
Name: ADE, JAMES L
Address: 4831MALPAS LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: PRES () Delete
Name: CHURCH, WILLIAM P PRES
Address: 1452 SAN AMARO ROAD
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ADE, JAMES L
Address: 4831 MALPAS LANE
City-St-Zip: JACKSONVILLE, FL 32210

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: WILLIAM P. CHURCH

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date