

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02566

FILED
Feb 28, 2009
Secretary of State

Entity Name: HOSANNA BAPTIST CHURCH, INC.

Current Principal Place of Business:

7800 RAMONA BLVD.
JACKSONVILLE, FL 32221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6832
JACKSONVILLE, FL 322366832 US

New Mailing Address:

FEI Number: 59-2347706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, CHRISTI M
7800 RAMONA BLVD WEST
JACKSONVILLE, FL 32221 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: VD () Delete
Name: JEFFORDS, RON
Address: 10,727-1 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: REEVE, JOHN
Address: 10,124 PLANK LANE
City-St-Zip: JACKSONVILLE, FL 32220

Title: D () Delete
Name: RAUCH, RONALD
Address: 8427 COLLINS ROAD
City-St-Zip: JACKSONVILLE, FL 32244

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: CHRISTI M SHIELDS

TRE

02/28/2009

Electronic Signature of Signing Officer or Director

Date