2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N03000000163

Entity Name: WEST ST. MARK BAPTIST CHURCH, INC.

Current Principal Place of Business:

1435 WEST STATE STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1435 WEST STATE STREET
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 89-0585488 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, WILLIE
1435 WEST STATE STREET
JACKSONVILLE, FL 32209 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:	JONES, WILLIE REV.	
Address:	1435 EAST 23RD STREET CIRCLE	
City-St-Zip:	JACKSONVILLE, FL 32206	
Title:	D	( ) Delete
Name:	COLLINS, OSCAR C	
Address:	429 EAST 3RD STREET	
City-St-Zip:	JACKSONVILLE, FL 32206	
Title:	CDB	( ) Delete
Name:	NATHEN, WILLIE	
Address:	4143 RIBAULT RIVER LN.	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	D	( ) Delete
Name:	COLEMAN, ROSE M	
Address:	3230 COMMONWEALTH AVENUE	
City-St-Zip:	JACKSONVILLE, FL 32205	
Title:	CTB	( ) Delete
Name:	JONES, ARTHUR	
Address:	9534 EVESHAN RD	
City-St-Zip:	JACKSONVILLE, FL 32208	
Title:	CDBE	( ) Delete
Name:	PORTER, WILLIE J	
Address:	3594 LISTON RD	
City-St-Zip:	JACKSONVILLE, FL 32209	

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:	
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: ARTHUR JONES CTB 04/30/2008
Electronic Signature of Signing Officer or Director — Date