2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N03000000307

1. Entity Name

LIGHT OF THE WORLD CHRISTIAN CHURCH OF JACKSONVILLE, INC.



FILED Apr 25, 2005 08:00 AM Secretary of State

Principal Place of Business

7039 PHILIPS HWY JACKSONVILLE, FL 32216 Mailing Address

7039 PHILIPS HWY JACKSONVILLE, FL 32216



01072005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 11-3660177 Applied For Not Applicable

8. Certificate of Status Desired

\$8.75 Additional Fee Required

.

6. Name and Address of Current Registered Agent

BERRIAN, EARNEST L 12033 RISING OAKS DRIVE E. JACKSONVILLE, FL 32223

SIGNATURE: 4

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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 Signature, typod or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature)				required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Financ Trust Fund Contribution.	oing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRIAN, EARNEST L 12033 RISING OAKS DRIVE E JACKSONVILLE, FL 32258				(kinghini ngayana
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRIAN, QUEEN E 12033 RISING OAKS DRIVE E JACKSONVILLE, FL 32258				U00000327603 04/25/05-80044-020 70.00
TITLE NAME STREET ADORESS CITY-ST-ZIP	PD PITTMAN, TITUS 4620 SUNBEAM STATION CT JACKSONVILLE, FL 32257		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZP	S CAMPBELL, SHIRLEY 7648 FAWN LAKE DRIVE S JACKSONVILLE, FL 32256				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SEABON, BRIAN 3555 BARBIZON CT JACKSONVILLE, FL 32257				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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.					