

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004817

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** HARVEST BIBLE CHAPEL OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

3180 RACE TRACK RD  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 600998  
JACKSONVILLE, FL 32260

**New Mailing Address:**

**FEI Number:** 54-2113310

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOORE, BEN  
12627 SAN JOSE BLVD.  
STE. 302  
JACKSONVILLE, FL 32223 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: P ( ) Delete  
Name: MARAGNI, BRETT  
Address: 1208 VERBENA CT  
City-St-Zip: JACKSONVILLE, FL 32259

Title: E ( ) Delete  
Name: EGGERS, DAVE  
Address: 2871 SWEETHOLLY DR  
City-St-Zip: JACKSONVILLE, FL 32223

Title: ELDE ( ) Delete  
Name: ZWIRKOSKI, GORDON  
Address: 1000 N. RANDALL RD.  
City-St-Zip: ELGIN, IL 60123

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PAST (X) Change ( ) Addition  
Name: MARAGNI, BRETT  
Address: 1208 VERBENA CT  
City-St-Zip: JACKSONVILLE, FL 32259

Title: ELDE (X) Change ( ) Addition  
Name: EGGERS, DAVE  
Address: 721 PINEY PLACE  
City-St-Zip: JACKSONVILLE, FL 32259

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: DAVE EGGERS

ELDE

04/24/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date