

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000000831

1. Entity Name
MESSIAH CAMPUS MINISTRIES, INC.



Principal Place of Business
**8000 BAYMEADOWS CIRCLE EAST
#47
JACKSONVILLE, FL 32256**

Mailing Address
**8000 BAYMEADOWS CIRCLE EAST
#47
JACKSONVILLE, FL 32256**



04202006 No Chg-NP CR2E037 (11/05)

4. FEI Number
20-0665786

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ASBURY, THOMAS F
3628 DARNALL PLACE
JACKSONVILLE, FL 32217**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed 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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SILVERMAN, MARK J 8000 BAYMEADOWS CIRCLE EAST, #47 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SILVERMAN, MARK J 8000 BAYMEADOWS CIRCLE EAST, #47 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SILVERMAN, MARK J 8000 BAYMEADOWS CIRCLE EAST, #47 JACKSONVILLE, FL 32256
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05/02/06-80129-025 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 817, 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.

SIGNATURE:

Mark J. Silverman

Mark J. Silverman

4/19/06

Date

904-434-6782

Daytime Phone #