

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002500

FILED
Apr 22, 2009
Secretary of State

Entity Name: FAITH COMMUNITY CHURCH, A NORTH FLORIDA CHURCH OF THE NAZARENE, INC.

Current Principal Place of Business:

248 N LAKE CUNNINGHAM AVE
JACKSONVILLE, FL 32259

New Principal Place of Business:

3450 C.R. 210 W
ST. JOHNS, FL 32259

Current Mailing Address:

248 N LAKE CUNNINGHAM AVE
JACKSONVILLE, FL 32259

New Mailing Address:

3450 C.R. 210 W
ST. JOHNS, FL 32259

FEI Number: 20-0867803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUER, WAYNE
248 N LAKE CUNNINGHAM AVE
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

BAUER, WAYNE
248 N LAKE CUNNINGHAM AVE
ST. JOHNS, FL 32259 US

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:

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: REV. () Delete
Name: BAUER, WAYNE R PRES
Address: 248 N LAKE CUNNINGHAM AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: REV. () Delete
Name: BAUER, VIRGINIA VP
Address: 248 N LAKE CUNNINGHAM AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: MR () Delete
Name: ATKINSON, STEVE SECR
Address: 800 MARIAM ELIAS WAY
City-St-Zip: ST AUGUSTINE, FL 32092

Title: MS () Delete
Name: BAKER, SERENA TREAS
Address: 4205 WICKS BRANCH ROAD
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: REV. (X) Change () Addition
Name: BAUER, WAYNE R PRES
Address: 248 N LAKE CUNNINGHAM AVE
City-St-Zip: ST. JOHNS, FL 32259

Title: REV. (X) Change () Addition
Name: BAUER, VIRGINIA VP
Address: 248 N LAKE CUNNINGHAM AVE
City-St-Zip: ST. JOHNS, FL 32259

Title: MS (X) Change () Addition
Name: TOMPKINS, MAUREEN SECR
Address: 101 N. LAKE CUNNINGHAM AVE
City-St-Zip: ST. JOHNS, 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: VIRGINIA BAUER

VP

04/22/2009

Electronic Signature of Signing Officer or Director

Date