

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007885

FILED
Feb 08, 2005
Secretary of State

Entity Name: THE MOSAIC CHURCH INC OF JACKSONVILLE

Current Principal Place of Business:

3319 TINYA CT
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

Current Mailing Address:

3319 TINYA CT
JACKSONVILLE, FL 32226 US

New Mailing Address:

FEI Number: 71-0971256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, RAYMOND J III
3319 TINYA CT
JACKSONVILLE, FL 32226 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: REEVES, RAYMOND J III
Address: 3319 TINYA CT
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: S () Delete
Name: MILEY, JAMES
Address: 1346 KENNESAW LN
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP () Delete
Name: LOWE, JAMES
Address: 10870 CREEKVIEW DR
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: T () Delete
Name: WARD, CHARLES A JR
Address: 15134 REEF DR N
City-St-Zip: JACKSONVILLE, FL 32226 US

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES A. WARD JR.

T

02/08/2005

Electronic Signature of Signing Officer or Director

Date