

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009472

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** AS YOU ARE CHURCH, INC.

**Current Principal Place of Business:**

7035 PHILLIPS HWY  
SUITE 8  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 5515  
JACKSONVILLE, FL 32247

**New Mailing Address:**

P.O. BOX  
5515  
JACKSONVILLE, FL, FL 32247

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

AS YOUR ARE COMMUNITY OUTREACH MINITRIES  
4969 ORMEWOOD CT  
JACKSONVILLE, FL 32207    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:            PRES  
Name:           PITTMAN, KELVIN SR  
Address:        6610 JUNIPER CREEK DRIVE  
City-St-Zip:   JACKSONVILLE, FL 32244

Title:            VICE  
Name:           MCDUFFIE, BENNIE  
Address:        12242 FLYNN ROAD  
City-St-Zip:   JACKSONVILLE, FL 32223

Title:            TREA  
Name:           DAVIS, CORNELIOUS  
Address:        9780 CREEKFRONT ROAD APT# 404  
City-St-Zip:   JACKSONVILLE, FL 32256

Title:            SECR  
Name:           MYRICK, MARY  
Address:        4901 SUNBEAM ROAD #301  
City-St-Zip:   JACKSONVILLE, FL 32257

Title:            MEMB  
Name:           TAYLOR, NATHANIEL  
Address:        3226 WALLWORTH COURT  
City-St-Zip:   JACKSONVILLE, FL 32225

I hereby 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 all other like empowered.

SIGNATURE: MARY MYRICK

SECR

03/14/2011

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

\_\_\_\_\_ Date