2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# N04000009929

Entity Name: FAITH BAPTIST CHURCH OF WESTSIDE, INC.

Current Principal Place of Business:

10145 103RD ST
JACKSONVILLE, FL 32210

New Principal Place of Business:

8595 103RD STREET
JACKSONVILLE, FL 32210

Current Mailing Address:

P. O. BOX 37007
JACKSONVILLE, FL 32236

New Mailing Address:

FEI Number: 20-1378935 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KING, JAMES
11477 BRIAN LAKES DR
JACKSONVILLE, FL 32221 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: T ( ) Delete
Name: KING, CLARENCE E
Address: 8242 OLD ENGLISH DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: T ( ) Delete
Name: JOHNSON, MARVIN
Address: 8042 CHATEAU DR SOUTH
City-St-Zip: JACKSONVILLE, FL 32221

Title: T ( ) Delete
Name: KAHNE, DAVID
Address: 500 CHAFFEE ROAD S, LOT #85
City-St-Zip: JACKSONVILLE, FL 32221

Title: T ( ) Delete
Name: AUSTIN, TIMOTHEE
Address: 2186 WILEY OAKS LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KING, CLARENCE E
Address: 8242 OLD ENGLISH DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: CARROLL, CAROL
Address: CONNIE JEAN DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PRES ( ) Change (X) Addition
Name: KING, JAMES
Address: 11477 BRIAN LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32221

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: JAMES KING PRES 03/29/2009
Electronic Signature of Signing Officer or Director — Date