

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010005

FILED  
Sep 27, 2012  
Secretary of State

**Entity Name:** FAITH TEMPLE FELLOWSHIP MINISTRY CHURCH OF CHRIST WRITTEN IN HEAVEN INC.

**Current Principal Place of Business:**

2133 WISHART ST.  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2177  
JACKSONVILLE, FL 32203 US

**New Mailing Address:**

**FEI Number:** 59-3054165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DAVIS, GREGORY DR.  
7806 CAXTON CIR. WEST  
JACKSONVILLE, FL 32208 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  
Name: DAVIS, GREGORY  
Address: 7806 CAXTON CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32208

Title: T  
Name: WEED, BEVERLY DR.  
Address: 3465 PHILLIPS HWY. APT. 1015  
City-St-Zip: JACKSONVILLE, FL 32207

Title: T  
Name: HARRIS, ROBERT A  
Address: 4060 ANDERSON WODS DR  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP  
Name: SMITH, BRENDA  
Address: 790 SABALO DR  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: T  
Name: JONES, TERRELL J  
Address: 10376 LANCASHIRE DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32219

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: TJJ

T

09/27/2012

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

\_\_\_\_\_  
Date