

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04482

FILED
Mar 10, 2009
Secretary of State

Entity Name: JENKS AVENUE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

3332 JENKS AVE.
PANAMA CITY, FL 32405 US

New Principal Place of Business:

Current Mailing Address:

3332 JENKS AVE
PANAMA CITY, FL 32405 US

New Mailing Address:

3332 JENKS AVE.
PANAMA CITY, FL 32405 US

FEI Number: 59-2270658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REECE, JACK E.
1503 CONNECTICUT AVE
LYNN HAVEN, FL 32444 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: TUCKER, HUGH H
Address: 1029 HUNTINGDON RD
City-St-Zip: PANAMA CITY, FL 32405

Title: VP () Delete
Name: MCKEAND, DALE
Address: 114 CANDLEWICK CR
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: HOLSOMBAKE, JIM,
Address: 604 WOOD TRAIL
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: CALHOUN, PAUL,
Address: 1800 MASSACHUSETTS AVE.
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: BACKUS, ROBERT,
Address: 1800 NEW JERSEY
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: BURLESON, HAYES H.,
Address: 107 TIMBER LANE
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WEGNER, WAYNE
Address: 2426 E. NINTH STREET
City-St-Zip: LYNN HAVEN, FL 32444

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 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: HUGH TUCKER

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date