2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N05003

Entity Name: FAITH TEMPLE ASSEMBLY OF GOD OF JACKSONVILLE, INC.

Current Principal Place of Business:

6561 FIRESTONE RD
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

6561 FIRESTONE RD
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 59-2236275 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRICKLAND, JEUL
5720 PIPER GLEN BLVD
JACKSONVILLE, FL 32222 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:	D	( ) Delete
Name:	GAMIT, CELESTE	
Address:	1122 LINWOOD LOOP	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	D	( ) Delete
Name:	CREWS, BILL	
Address:	3784 MOONFLOWER RD	
City-St-Zip:	JACKSONVILLE, FL	
Title:	DS	( ) Delete
Name:	BOYD, DON	
Address:	10778 SPURS CT.	
City-St-Zip:	JACKSONVILLE, FL	
Title:	PD	( ) Delete
Name:	STRICKLAND, JEUL	
Address:	5720 PIPER GLEN BLVD	
City-St-Zip:	JACKSONVILLE, FL 32222	
Title:	D	( ) Delete
Name:	PFEIL, CHRIS	
Address:	2884 PLUM ORCHARD DRIVE	
City-St-Zip:	ORANGE PARK, FL 32073	
Title:	D	( ) Delete
Name:	MANSELL, DENNIS	
Address:	3748 FRYE AVE W.	
City-St-Zip:	JACKSONVILLE, FL 32210	

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:	
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: JEUL STRICKLAND PRES 04/27/2009

Electronic Signature of Signing Officer or Director — Date