

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005394

FILED
May 07, 2008
Secretary of State

Entity Name: GREAT HARVEST MISSIONARY BAPTIST CHURCH, INC. OF JACKSONVILLE, FLORIDA

Current Principal Place of Business:

2611 PALMDALE AVE.
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9502
JACKSONVILLE, FL 322089502

New Mailing Address:

2611 PALMDALE AVENUE
JACKSONVILLE, FL 32208

FEI Number: 43-2106943 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LOWE, GEORGE B
86 ANDRESS STREET
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: D () Delete
Name: LOWE, GEORGE B
Address: 86 ANDRESS STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: LOWE, SHIREEN D
Address: 86 ANDRESS STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: C (X) Delete
Name: SANDERS, WILLIE J
Address: 12760 MICHAELS LANDING CIRCLE NORTH
City-St-Zip: JACKSONVILLE, FL 32224

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:

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: GEORGE B. LOWE

D

05/07/2008

Electronic Signature of Signing Officer or Director

Date