

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009366

FILED
Jan 13, 2008
Secretary of State

Entity Name: MOUNT CARMEL MISSIONARY BAPTIST CHURCH OF JACKSONVILLE FLORIDA INC.

Current Principal Place of Business:

1329 MARKET STREET
JACKSONVILLE, FL 32206 US

New Principal Place of Business:

Current Mailing Address:

1329 MARKET STREET
JACKSONVILLE, FL 32206 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARNER, YOLANDA D
5739 TECHWOOD DRIVE
JACKSONVILLE, FL 32277 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: JACKSON, ANTHONY W
Address: 6308 RAPID RIVER DRIVE
City-St-Zip: JACKSONVILLE, FL 32219 US

Title: D () Delete
Name: SWAIN, GENE A
Address: 1721 EAST 24TH STREET
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: D () Delete
Name: SWAIN, ELLA S
Address: 1721 EAST 24TH STREET
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: D () Delete
Name: BULLARD, CYNTHIA D
Address: 5739 TECHWOOD DRIVE
City-St-Zip: JACKSONVILLE, FL 32277 US

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:

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: GENE A. SWAIN

D

01/13/2008

Electronic Signature of Signing Officer or Director

Date