

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010352

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** ETHIOPIAN EVANGELICAL CHURCH OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

7900 LONE STAR RD  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

7900 LONE STAR RD  
JACKSONVILLE, FL 32211

**New Mailing Address:**

**FEI Number:** 11-3824407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOLLE, MICHAEL  
11604 SAIL AVENUE  
JACKSONVILLE, FL 32246 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: WOLLE, MICHAEL  
Address: 11604 SAIL AVENUE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete  
Name: DABIE, MEBA  
Address: 7833 EATON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: CHAMISA, GIRMA  
Address: 7833 EATON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32211

**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: MR MICHAEL WOLLE

D

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date