2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N07000010534 1. Entity Name								-	
THE BAPTIST MINISTER CENTER OF DUVAL AND ADJACENT COUNTIES, INC.					08 SEP 17 PM 1:55				
Principal Place of Business Mailing Address					JEUI ALLA	RETARY (AHASSEE	FLOR	IDA	
600 EAVERSON ST. 600 EAVERSON ST.				,	17,122	.,			
JACKSONVILLE FL 32204 JACKSONVILLE FL 32204			204						
2. Principal Place at Business - No P.O. Box #		3. Mailing Address		114444			EIDI ENES SIM SI	4#41 #1 14#1	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		2nd MOORE CR2E037 (4/08)					
City & State		City & State			4. FEI Number 26	72419			oplied For ot Applicable
Zip	Country	Zip _	Coun	itry	5. Certificate of Sta	atus Desired		8.75 Add ee Require	
6. Name and Address of Current Registered Agent					7. Name and Add	ress of New Ri	egistered A	gent	
PRECTON C E				Name					
PRESTON, C.E. 600 EAVERSON ST. JACKSONVILLE FL 32204				Street Address (P.O. Box Number is Not Acceptable)					
JAC	NOUNVILLE FL 32204								
The above named entity submits this statement for the purpose of changing its re				City			FL	Zip Cod	
the obligat	named entity submits this statement to tions of registered agent.	or the purpose of changing its	registered	d office or registe	ered agent, or both, in	the State of Flo	rida. 1 am fa 1	amiliar with,	and accept
	All						_ /	/ _	,
SIGNATURE Signature, typed or protect name of registrand significand significands. (NOTE: Registers April signature required vinces resistang) DATE									
SIGNATURE-		THE STATE OF	- Dag erecad	Anani ar na sa san sa	of what repetitions	د م	<u> </u>	18	<u> </u>
SIGNATURE	Signature, typed or printed name of registered transit	and tile i applicable. (NOTE	: Reg stared	Agoni signax <i>ire re</i> quire	ió wich renslating)		DATE	108	
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	Signature, typed or printed name of registered tracely	u	npaign Fir	nancing	\$5.00 May Be Added to Fees		DATE (e Check la Departi		
 - - 	Signature (speed or present nerve of registand (speed FILE NOW: FEE IS \$61.25 Due By September 3, 2008	9. Election Cam Trust Fund C	npaign Fir Contributio	nancing	\$5.00 May Be Added to Fees	Florid	a Departi	ment of S	itate
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SIGNATURE

GNATURE:

The dot of the report of supplied with this filling does not quity for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

8-11-08

08-14-2008 90001 029 ****61.25 [..." | [N07000010534