2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07439

FILED May 08, 2007 Secretary of State

Entity Name: WAYMAN CHAPEL AFRICAN METHODIST EPISCOPAL CHURCH OF JACKSONVILLE, FLORIDA, INC. **Current Principal Place of Business: New Principal Place of Business:** 8855 SANCHEZ RD JACKSONVILLE, FL 32217 LIS **Current Mailing Address: New Mailing Address:** 8855 SANCHEZ RD JACKSONVILLE, FL 32217 US FEI Number: 59-3021698 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: Name and Address of New Registered Agent: GRIFFIN, MARK L. 12511 MISSION HILLS DRIVE SOUTH JACKSONVILLE, FL 32225 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DPC () Delete () Change () Addition GRIFFIN, MARK L. Name: Name: Address: 12511 MISSION HILLS DRIVE SOUTH Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition BURNEY, CALVIN SR. Name: Name: BOLLING, DESI SR. Address: 5626 INTERNATIONAL DRIVE Address: 4111 SAN SERVERA DRIVE SOUTH City-St-Zip: JACKSONVILLE, FL 32219 City-St-Zip: JACKSONVILLE, FL 32217 Title: () Delete Title: SD (X) Change () Addition SWANSON, JOHN Name: STUBBS, KEVIN Name: 366 SOUTH HAMPTON CLUB WAY 2805 PEBBLEWOOD LANE Address: Address: City-St-Zip: SAINT AUGUSTINE, FL 32092 City-St-Zip: ORANGE PARK, FL 32065

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: MARK L. GRIFFIN DPC 05/08/2007