

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001416

FILED
Feb 23, 2009
Secretary of State

Entity Name: FIRST COAST HOUSE OF GOD INC.

Current Principal Place of Business:

8119 NEW KINGS RD.
JACKSONVILLE, FL 32219

New Principal Place of Business:

Current Mailing Address:

8119 NEW KINGS RD.
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 26-1964934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, LORI
8845 MERSEYSIDE AVENUE
JACKSONVILLE, FL 32219 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: JONES, RUFUS
Address: 9160 ALTAMONT CIRCLE
City-St-Zip: JACKSONVILLE, FL 32208

Title: T () Delete
Name: JONES, LORI
Address: 8845 MERSEYSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32219

Title: S () Delete
Name: NESMITH, THERESA
Address: 1741 WEST 26TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: SULLIVAN, JENNIFER TRUSTEE
Address: 725 TROWBRIDGE DRIVE
City-St-Zip: JACKSONVILLE, FL 32205

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: RUFUS JONES

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date