2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 27, 2009
Secretary of State

DOCUMENT# N08000002612

Entity Name: HOPE LUTHERAN CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

12200 MCCORMICK ROAD
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

12200 MCCORMICK ROAD
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 26-2192437 **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:

HUSEMAN, WILLIAM R ESQ.
3733 UNIVERSITY BLVD. WEST
SUITE 210-B
JACKSONVILLE, FL 32217 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: SIEWERT, DARYL A OFFICER
Address: 12200 MCCORMICK ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: DEPLEASE, MEL OFFICER
Address: 12200 MCCORMICK ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: BOESDORFER, CRAIG OFFICER
Address: 12200 MCCORMICK ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: DEPLISEA, MEL OFFICER
Address: 12200 MCCORMICK ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: SKYLES, JASON OFFICER
Address: 12200 MCCORMICK ROAD
City-St-Zip: JACKSONVILLE, FL 32225

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: JASON E SKYLES D 06/27/2009

Electronic Signature of Signing Officer or Director — Date