

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003968

FILED
Apr 21, 2009
Secretary of State

Entity Name: JUST GIVE ME JESUS JACKSONVILLE 2009, INC.

Current Principal Place of Business:

1301 RIVERPLACE BOULEVARD
SUITE 2450
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1301 RIVERPLACE BOULEVARD
SUITE 2450
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 35-2333212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUD, JEFFREY D ESQ.
1301 RIVERPLACE BOULEVARD
SUITE 2450
JACKSONVILLE, FL 32207 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: PD () Delete
Name: SOUD, GINGER
Address: 1301 RIVERPLACE BOULEVARD #2450
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD () Delete
Name: VEAL, PATSY
Address: 1301 RIVERPLACE BOULEVARD #2450
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD () Delete
Name: SULZBACHER, SUSAN
Address: 1301 RIVERPLACE BOULEVARD #2450
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD () Delete
Name: HASTINGS, ANNETTE
Address: 1301 RIVERPLACE BOULEVARD #2450
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: KIRKPATRICK, MARILYN
Address: 1301 RIVERPLACE BOULEVARD #2450
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: STROUD, DANA
Address: 1301 RIVERPLACE BOULEVARD #2450
City-St-Zip: JACKSONVILLE, FL 32207

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: GINGER SOUD

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date