

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008590

FILED
Mar 10, 2009
Secretary of State

Entity Name: CALEB PARK MISSION, INC.

Current Principal Place of Business:

2218 BLAIR ROAD
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

2218 BLAIR ROAD
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 38-3790263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, GERALD H
2218 BLAIR ROAD
JACKSONVILLE, FL 32221 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: TAYLOR, GERALD H
Address: 2218 BLAIR ROAD
City-St-Zip: JACKSONVILLE, FL 32221

Title: TS () Delete
Name: TAYLOR, SHARON S
Address: 2218 BLAIR ROAD
City-St-Zip: JACKSONVILLE, FL 32221

Title: V () Delete
Name: MILLER, TAMELA L
Address: 440 RAMBLE ROAD
City-St-Zip: DOUGLAS, GA

Title: D () Delete
Name: MILLER, MICHAEL
Address: 440 RAMBLE ROAD
City-St-Zip: DOUGLAS, GA

Title: V () Delete
Name: HALIFKO, ROBIN R
Address: 11223 MARTIN LAKES DR
City-St-Zip: JACKSONVILLE, FL 32220

Title: D () Delete
Name: HALIFKO, CHRISTOPHER
Address: 11223 MARTIN LAKES DR
City-St-Zip: JACKSONVILLE, FL 32220

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:

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: GERALD TAYLOR

PRES

03/10/2009

Electronic Signature of Signing Officer or Director

Date