

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17654

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** CHURCH OF GOD AND SAINTS OF CHRIST, FIRST TABERNACLE, INC.

**Current Principal Place of Business:**

3401 STUART STREET  
JACKSONVILLE, FL 322094350

**New Principal Place of Business:**

**Current Mailing Address:**

3401 STUART STREET  
JACKSONVILLE, FL 322094350

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EAVES, SAMUEL JOSEPH, SR.  
3401 STUART STREET  
JACKSONVILLE, FL 32209 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  
Name: EAVES, SAMUEL J  
Address: 10467 SONG SPARROW LANE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: V  
Name: EAVES, MARY A  
Address: 3710 STUART STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: TD  
Name: EAVES, EVELYN  
Address: 2259 COURTNEY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: SD  
Name: JONES, ABIGAIL E  
Address: 3416 N. STUART STREET  
City-St-Zip: JACKSONVILLE, FL 322094351

Title: P  
Name: LEGREE, BEVERLY  
Address: 2638 SUNRISE RIDGE LANE  
City-St-Zip: JACKSONVILLE, FL 32211

I hereby 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 all other like empowered.

SIGNATURE: EVELYN P. EAVES

TD

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date