

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22740

FILED
Jan 17, 2012
Secretary of State

Entity Name: THE WESTSIDE CHRISTIAN FAMILY CHAPEL, INC.

Current Principal Place of Business:

4541-8 SHIRLEY AVENUE
JACKSONVILLE, FL 322102069 US

New Principal Place of Business:

Current Mailing Address:

4541-8 SHIRLEY AVENUE
JACKSONVILLE, FL 322102069 US

New Mailing Address:

FEI Number: 59-2857371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, PATRICK D.
800 WEST MONROE STREET
JACKSONVILLE, FL 32202 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: COLEMAN, PATRICK D.
Address: 4834 ALGONQUIN AVE
City-St-Zip: JACKSONVILLE, FL

Title: D
Name: CRENSHAW, MCCARTHY JR
Address: 3855 ST JOHNS AVE
City-St-Zip: JACKSONVILLE, FL

Title: D
Name: MITCHELL, KENNETH R.
Address: 5207 ORTEGA GLEN DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: ALLCORN, FRANK
Address: 4287 VENETIA BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: BROOKE, ALLAN F II
Address: 101 E ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: ROBERTS, JIMMY D
Address: 7325 ORTEGA HILLS DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

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: PATRICK D. COLEMAN

D

01/17/2012

Electronic Signature of Signing Officer or Director

_____ Date