2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004
Secretary of State

DOCUMENT# N27275

Entity Name: LAKEWOOD UNITED METHODIST CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

6133 SAN JOSE BLVD
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6133 SAN JOSE BLVD
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-0979203 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERSON, KENNETH G.
2540 GULF LIFE TOWER
N
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: D ( ) Delete
Name: BOHANING, STELLA
Address: 10466 DOCKSIDER DR W
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete
Name: COLLINS, TERRY
Address: 7249 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 322173231

Title: D ( ) Delete
Name: MORGAN, MARY
Address: 943 BROOKWOOD RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete
Name: FIGART, LARRY
Address: 5982 KRAMER DR
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete
Name: SOX, JACK
Address: 4736 OSPREY CT
City-St-Zip: JACKSONVILLE, FL 32217

Title: CD ( ) Delete
Name: WHITAKER, ED
Address: 10042 LAKE LAMAR CT
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BLYTHE, SYLVIA
Address: 9043 KENTISH CT
City-St-Zip: JACKSONVILLE, FL 32257

Title: CD (X) Change ( ) Addition
Name: COLLINS, TERRY
Address: 7249 ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 322173231

Title: D (X) Change ( ) Addition
Name: MORGAN, JIM
Address: 943 BROOKWOOD RD
City-St-Zip: JACKSONVILLE, FL 32207

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

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

Title: D (X) Change ( ) Addition
Name: WILCOX, JANE
Address: 8155 NORTH SUTTON PLACE
City-St-Zip: JACKSONVILLE, FL 32217

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TERRY COLLINS CD 04/15/2004

Electronic Signature of Signing Officer or Director — Date