
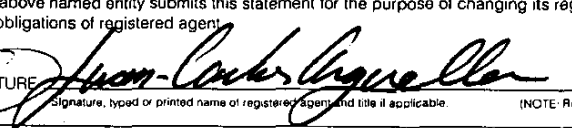
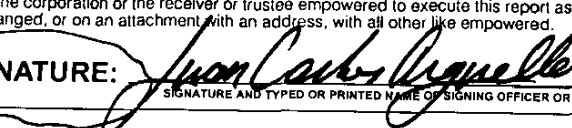


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2007 8:00 am**  
**Secretary of State**

02-14-2007 90053 038 \*\*\*\*61.25

<b>DOCUMENT # N32013</b> 1. Entity Name <b>FAITH UNITED METHODIST CHURCH OF JACKSONVILLE, INC.</b>					
Principal Place of Business <b>4000 SPRING PARK RD JACKSONVILLE, FL 32207 US</b>			Mailing Address <b>4000 SPRING PARK RD JACKSONVILLE, FL 32207 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		01242007 Chg-NP CR2E037 (12/06)	
City & State  Zip Country		City & State  Zip Country		4. FEI Number <b>59-0696290</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>MAIOLO, ROBERT 10258 CYPRESS LAKE DR JACKSONVILLE, FL 32256</b>				7. Name and Address of New Registered Agent Name <b>Juan-Carlos Arguelles</b> Street Address (P.O. Box Number is Not Acceptable) <b>2416 Holmes St</b> City <b>Jax</b> <b>FL</b> Zip Code <b>32207</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDVC DANIEL, SANDY <input type="checkbox"/> Delete 3395 PICKWICK DR S JACKSONVILLE, FL 32257			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MAIOLO, ROBERT <input checked="" type="checkbox"/> Delete 10258 CYPRESS LAKES DR JACKSONVILLE, FL 32256			TITLE <b>Chair</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>Juan-Carlos Arguelles</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>2416 Holmes St.</b> <b>Jacksonville, FL 32207</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLAIR, TOM <input type="checkbox"/> Delete 2526 PROVOST RD E JACKSONVILLE, FL 32216			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PICKETT, LINDA <input checked="" type="checkbox"/> Delete 2704 ELISA DR E JACKSONVILLE, FL 32216			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Joan Sabal</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>5016 River Point Rd.</b> <b>Jacksonville, FL 32207</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DAVIS, FRANK <input type="checkbox"/> Delete 6404 COLGATE RD JACKSONVILLE, FL 32217			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOGGINS, JIMMIE S <input checked="" type="checkbox"/> Delete 725 MONTERGO RD E JACKSONVILLE, FL 32216			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Maxine Westbrook</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>2962 Cobblestone Circle W.</b> <b>Jacksonville, FL 32225</b>
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 				Date <b>2/8/07</b> Daytime Phone # _____	