

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32500

FILED
Apr 13, 2004
Secretary of State

Entity Name: PROMISED LAND OF JACKSONVILLE, INC.

Current Principal Place of Business:

7776 MORSE AVENUE
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

7525 SHARBETH DR. S
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 59-3311955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOODY, DAVID P
7525 SHARBETH DRIVE SOUTH
JACKSONVILLE, FL 32210 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: PD () Delete
Name: WOODY, DAVID P
Address: 7525 SHARBETH ON S.
City-St-Zip: JACKSONVILLE, FL 32210

Title: VD () Delete
Name: KNOWLES, EARL
Address: 7429 BOB D LIK RD
City-St-Zip: JACKSONVILLE, FL 32219

Title: TDS () Delete
Name: WOODY, SHARON
Address: 7525 SHARBETH DRIVE S.
City-St-Zip: JACKSONVILLE, FL 32210

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:

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: DAVID P. WOODY

PD

04/13/2004

Electronic Signature of Signing Officer or Director

Date