


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N34977</b> 1. Entity Name CHERRY STREET CHURCH OF CHRIST, INC.	
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Principal Place of Business 1409 CHERRY STREET JACKSONVILLE, FL 32205	Mailing Address 1409 CHERRY STREET JACKSONVILLE, FL 32205
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**DO NOT WRITE IN THIS SPACE**



04192008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2980799	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LINDELL, J. MICHAEL  
12276 SAN JOSE BLVD.  
STE. 126  
JACKSONVILLE, FL 32223-8630

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IN THIS SPACE**

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 reissuing) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS YOUNG, DONALD A 5204 POULAN STREET JACKSONVILLE, FL 32209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD AUSTIN, ALFRED A 288 MEADOW WOOD TRAIL ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORELAND, GERALD L 8718 HAVERHILL STREET JACKSONVILLE, FL 32211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

U000000917393  
05/13/08-80037-024 61.25

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:** *Alfred A. Austin* **Alfred A. Austin** *4-20-08* *(904) 778-8681*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #