

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

**FILED  
Jul 03, 2008  
Secretary of State**

DOCUMENT# N37249

**Entity Name:** GOSPEL TEMPLE CHURCH OF GOD IN CHRIST OF JACKSONVILLE, FLORIDA, INC.

**Current Principal Place of Business:**

503 E. 63RD STREET  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

980 CHALMET LANE  
JACKSONVILLE, FL 32218

**New Mailing Address:**

**FEI Number:** 59-2916790      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

VEREEN, LEWIS D  
980 CHALMET LANE  
JACKSONVILLE, FL 32218      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: PCTD      ( ) Delete  
Name: VEREEN, LEWIS D SR.  
Address: 980 CHALMET LN  
City-St-Zip: JACKSONVILLE, FL

Title: T      ( ) Delete  
Name: HARVEY, JERRY  
Address: 11104 KEY MADEIRA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VDS      ( ) Delete  
Name: VEREEN, BERTIE M  
Address: 980 CHALMET LANE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: T      ( ) Delete  
Name: SIPLIN, RETHA  
Address: 1031 GLENCARIN STREET  
City-St-Zip: JACKSONVILLE, FL 32208

Title: T      ( ) Delete  
Name: HARVEY, WILLIE J JR  
Address: 1780 EAST 23RD STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: T      (X) Delete  
Name: BURKE, JACQUOLYN  
Address: 7974 MONTEREY BAY DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

**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:

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 exemption stated 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 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: VEREEN LEWIS D

PCTD

07/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date