

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38132

FILED  
Jan 20, 2008  
Secretary of State

**Entity Name:** GETHSEMANE CHURCH OF GOD IN CHRIST, INC.

**Current Principal Place of Business:**

917 E DURAL ST  
LIVE OAK, FL 32060

**New Principal Place of Business:**

1014 NE DUVAL ST  
LIVE OAK, FL 32060

**Current Mailing Address:**

P.O. BOX 1343  
LIVE OAK, FL 32060

**New Mailing Address:**

**FEI Number:** 59-3105467      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JENKINS, OLIVER  
6640 RHONE DR  
JACKSONVILLE, FL 32208      US

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

JENKINS, OLIVER L PASTOR  
6640 RHONE DR  
JACKSONVILLE, FL 32208      US

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: OLIVER L. JENKINS

01/20/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: FITCH, GEORGE E  
Address: 22538 128TH ST  
City-St-Zip: LIVE OAK, FL 32060

Title: D      ( ) Delete  
Name: SAPP, OLLIE MAE  
Address: 8472 161ST RD  
City-St-Zip: LIVE OAK, FL 32060

Title: D      ( ) Delete  
Name: CHERRY, MILDRED  
Address: RT 2 BOX 13  
City-St-Zip: LIVE OAK, FL 32060

Title: M      ( ) Delete  
Name: FITCH, YVONNE  
Address: 22538 128TH ST  
City-St-Zip: LIVE OAK, FL 32060

Title: M      ( ) Delete  
Name: JENKINS, CONNIE  
Address: 6640 RHOVE DR  
City-St-Zip: JACKSONVILLE, FL

Title: D      (X) Delete  
Name: BROWN, BENJAMIN  
Address: P.O. BOX 51513  
City-St-Zip: JACKSONVILLE, FL 32240

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: FITCH, GEORGE E DEACON  
Address: 22538 128TH ST  
City-St-Zip: LIVE OAK, FL 32060

Title: D      (X) Change ( ) Addition  
Name: SAPP, OLLIE M  
Address: 8472 161ST RD  
City-St-Zip: LIVE OAK, FL 32060

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: GEORGE FITCH

DEA

01/20/2008

Electronic Signature of Signing Officer or Director

Date