2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41900

FILED May 19, 2009 Secretary of State

Entity Name: SPRINGFIELD CHRISTIAN CHURCH (DISCIPLES OF CHRIST) OF JACKSONVILLE, FLORIDA,

INC

Current Principal Place of Business: New Principal Place of Business:

25 WEST 9TH ST.

JACKSONVILLE, FL 32206

Current Mailing Address: New Mailing Address:

25 WEST 9TH ST. JACKSONVILLE, FL 32206

FEI Number: 59-0931258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: Name and Address of New Registered Agent:

ROBERTS, CARY V HINSON, LINDA 1420 MENLO AVE 3842 MARLAND ST

JACKSONVILLE, FL 32218 US JACKSONVILLE, FL 32209 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: LINDA HINSON 05/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: HINSON, LINDA Name: SIMMONS, LINWOOD

Address: 3842 MARLAND ST Address: 331E 10TH STREET

City-St-Zip: JACKSONVILLE, FL 32209

City-St-Zip: JACKSONVILLE, FL 32206

Title: T () Delete Title: T (X) Change () Addition Name: ALEXANDER, FLORENCE Name: ALEXANDER, FLORENCE

Address: 669 ALDER STREET Address: 2940 PALMDALE STREET
City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32208

Title: S () Delete Title: () Change () Addition

 Name:
 KETIA, ROBERTS
 Name:

 Address:
 1420 MENLO AVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:

Title: D () Delete Title: MIN (X) Change () Addition

 Name:
 SIMMONS, LENWOOD
 Name:
 COLEY, WILLIAMS L

 Address:
 331 E 10TH STREET
 Address:
 8259 TEATICKET DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:
 JACKSONVILLE, FL 32244

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: LINWOOD SIMMONS P 05/19/2009