

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42049

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** DEEPER WATERS CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

11089 LEM TURNER RD.  
JACKSONVILLE, FL 32218 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 40692  
JACKSONVILLE, FL 32203 US

**New Mailing Address:**

**FEI Number:** 59-3025601

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DOUGLAS, JAMES  
6370 TOYOTA DR  
JACKSONVILLE, FL 32244 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  
Name: ROZIERS, HERBERT A  
Address: 1235 TURTLE CREEK DR. S.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD  
Name: ROZIERS, KAREN W  
Address: 1235 TURTLE CREEK DR. S.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD  
Name: MILLER, WILLIAM J.  
Address: 10621 NORTRH KENDALL DR. #113  
City-St-Zip: MIAMI, FL 33176

Title: SD  
Name: MCCANTS, SABRINA  
Address: 1816 WEST 28TH ST.  
City-St-Zip: JACKSONVILLE, FL 32209

I hereby 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 all other like empowered.

**SIGNATURE:** HERBERT A.ROZIERS

PD

03/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date