

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44527

FILED  
May 10, 2005  
Secretary of State

**Entity Name:** RIVER CITY FAMILY CHURCH, INC.

**Current Principal Place of Business:**

6500 WEST 5TH STREET  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

**Current Mailing Address:**

6500 WEST 5TH STREET  
JACKSONVILLE, FL 32254

**New Mailing Address:**

**FEI Number:** 59-3066341      **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:**

BABBITT, JEFFREY D  
1650 MCCAUL RD  
JACKSONVILLE, FL 32220      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: ELLISON, GLENN  
Address: 1652 DOLPH ROAD  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: VP      ( ) Delete  
Name: SILCOX, WILLIAM S  
Address: 6780 CISCO GARDENS RD. W.  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: TD      ( ) Delete  
Name: BABBITT, JEFFREY D  
Address: 1650 MCCAUL ROAD  
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: D      ( ) Delete  
Name: TURNER, DANIEL  
Address: 4825 SEFA CIRCLE N.  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D      ( ) Delete  
Name: ELLISON, SHEILA  
Address: 1652 DOLPH ROAD  
City-St-Zip: JACKSONVILLE, FL 32220 US

**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 for the exemption stated in Section 119.07(3)(i), 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: JEFFREY D. BABBITT

MR.

05/10/2005

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

\_\_\_\_\_  
Date