

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50422

FILED
May 01, 2009
Secretary of State

Entity Name: KIRKWOOD PRESBYTERIAN CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

8701 ARGYLE FOREST BLVD.
JACKSONVILLE, FL 32244 US

New Principal Place of Business:

Current Mailing Address:

8701 ARGYLE FOREST BLVD.
JACKSONVILLE, FL 32244 US

New Mailing Address:

FEI Number: 59-3066301 **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:

NICHOLS, WILLIAM E
8701 ARGYLE FOREST BLVD
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: D () Delete
Name: PHILLIPS, MICHAEL
Address: 8701 ARGYLE FOREST BLVD
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: HARLAN, SANDRA
Address: 8701 ARGYLE FOREST BLVD.
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: D () Delete
Name: NICHOLS, WILLIAM E
Address: 8701 ARGYLE FOREST BLVD.
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: D () Delete
Name: COOK, SALLY
Address: 8701 ARGYLE FOREST BLVD
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: D () Delete
Name: WOODWORTH, RON
Address: 8701 ARGYLE FOREST BLVD.
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: T () Delete
Name: MCCLELLAN, WENDY
Address: 8701 ARGYLE FOREST BLVD
City-St-Zip: JACKSONVILLE, FL 32244 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PAUGH, O. GEORGE
Address: 8701 ARGYLE FOREST BLVD
City-St-Zip: JACKSONVILLE, FL 32244

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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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: WENDY T MCCLELLAN

TREA

05/01/2009

Electronic Signature of Signing Officer or Director

Date