

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000971

FILED
Mar 22, 2007
Secretary of State

Entity Name: HODGES BOULEVARD PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

4140 HODGES BLVD.
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

4140 HODGES BLVD.
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 59-3157535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTON, ROBERT
4140 HODGES BLVD
JACKSONVILLE, FL 32224 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 () Delete
Name: HIX, MARIE
Address: 4140 HODGES BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP () Delete
Name: POLLOT, JAMES
Address: 4140 HODGES BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: DS () Delete
Name: STEVE, MICHAEL
Address: 4140 HODGES BLVD
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD () Delete
Name: WESTON, ROBERT
Address: 4140 HODGES BLVD
City-St-Zip: JACKSONVILLE, FL 32224

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT WESTON

TD

03/22/2007

Electronic Signature of Signing Officer or Director

Date