## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000713

FILED Mar 29, 2006 Secretary of State

Entity Name: CORAL RIDGE BAPTIST CHURCH, SCHOOLS, UNIVERSITY, AND FREEDOM SEMINARY, **INCORPORATED** 

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

2967 HUFFMAN BLVD

JACKSONVILLE, FL 32246 LIS

**Current Mailing Address: New Mailing Address:** 

2967 HUFFMAN BOULEVARD P O BOX 16502 JACKSONVILLE, FL 32245 US P.O. BOX 16502 JACKSONVILLE, FL 32245

FEI Number: 59-2128653 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BURNSED, JEFF 9719 NIMITZ COURT NORTH JACKSONVILLE, FL 32246

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** () Change () Addition () Delete BURNSED, JEFF D Name: Name: 9719 NIMITZ CT., N. Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition FOX, ANTHONY M Name: Name: Address: 9755 JUPITER CT., N. Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: () Delete Title: () Change () Addition BURNSED, JANE M Name: Name: Address: 9719 NIMITZ CT NORTH Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: 0 ( ) Delete Title: () Change () Addition Name: HANNAH, TOMMY Name: Address: 9738 IVEY ROAD Address:

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip:

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

BURNSED, TIFFANY J BURNSED, TIFFANY J Name: Name: 9719 NIMITZ CT NORTH 9719 NIMITZ CT NORTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

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

JERVIS, TOMMY Name: Name:

Address: Address: 2967 HUFFMAN BOULEVARD JACKSONVILLE, FL 32245 City-St-Zip: 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: JEFF BURNSED D 03/29/2006