

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000713

FILED
Jan 16, 2009
Secretary of State

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

Current Principal Place of Business:

2967 HUFFMAN BLVD
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

Name and Address of Current Registered Agent:

BURNSED, JEFF
9719 NIMITZ COURT NORTH
JACKSONVILLE, FL 32246 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: BURNSED, JEFF B DR
Address: 9719 NIMITZ CT., N.
City-St-Zip: JACKSONVILLE, FL 32246

Title: VD () Delete
Name: FOX, ANTHONY M DR
Address: 9755 JUPITER CT., N.
City-St-Zip: JACKSONVILLE, FL 32246

Title: O () Delete
Name: BURNSED, TIFFANY J
Address: 9719 NIMITZ CT NORTH
City-St-Zip: JACKSONVILLE, FL 32246

Title: O () Delete
Name: JERVIS, TOMMY J DR
Address: 2967 HUFFMAN BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32246

Title: O () Delete
Name: ENER, ERIM E
Address: 9729 NIMITZ CT NORTH
City-St-Zip: JACKSONVILLE, FL 32246

Title: O () Delete
Name: JONES, GARFIELD
Address: 2967 HUFFMAN BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32246

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:

Title: O (X) Change () Addition
Name: DULAJ, BEN
Address: 9716 NIMITZ COURT NORTH
City-St-Zip: JACKSONVILLE, FL 32246

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: JEFF BURNSED

DR

01/16/2009

Electronic Signature of Signing Officer or Director

_____ Date