2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 20, 2008 8:00 am DOCUMENT # N93000001726 **Secretary of State** 1. Entity Name 03-20-2008 90026 021 ****70.00 **BIBLE BELIEVERS BAPTIST CHURCH OF** JACKSONVILLE, INC. Principal Place of Business Mailing Address 3857 HARTLEY ROAD 3857 HARTLEY ROAD JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-3177129 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GROSS, BRADFORD W Street Address (P.O. Box Number is Not Acceptable) 12084 STAGGERBUSH COURT JACKSONVILLE FL 32223 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or parted name of registered agent and the J approach. (NOTE: Registered Agent signature regulated when reinstating) DATE FILE NOW: FEE IS \$61.25 ... Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Duế By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delate TITLE Change Addition HIGHCOVE, ROGER M MAME NAME 2324 JANET DR. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32259 CITY-ST-ZIP CITY-ST-ZIP D/T TITLE Delete TITLE Addition Change GROSS, BRADFORD W. NAME NAME 12084 STAGGERBUSH COURT STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32223 CITY-ST-ZIP CITY-ST-ZIP TITLE X Delete TITLE Change ☐ Addition HIGHCOVE, ROGER N NAME NAME 10715 HAMPTON ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32257 CITY-ST-7IP CITY-ST-ZiP THE Dalete THE Ø/s Change ☐ Addition FURUKAWA, DAVID K NAME NAME Furukawa, Oovid K. 1448 COUNTY ROAD 13 SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT AUGUSTINE FL 32092 CITY-ST-ZiP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME w. Crain 2851 Casa Del 2:0 Terrace STREET AUDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CDY-87-7/P

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Brodgod W. Doss Brodford W. Gross 3-9-08 (90W755-4685