2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001838

FILED May 16, 2006 Secretary of State

Entity Name: GLAD TIDINGS OF JACKSONVILLE, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
	RY ROAD IVILLE, FL 32216			
urrent N	lailing Address:	New Maili	ng Address:	
	RY ROAD IVILLE, FL 32216			
accordan	nce with s. 607.193(2)(b), F.S., the corporation did not rec	El Number Not App ceive the prior notic		
lame and	d Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
131 TER	DENNIS J RY ROAD IVILLE, FL 32216 US			
	e named entity submits this statement for the purp	ose of changing	its registered office or registered agent, or bo	
the Stat	e of Florida.	ose of changing	its registered office or registered agent, or bo	
the Stat	e of Florida. RE:	ose of changing		
the Stat	e of Florida.	ose of changing	its registered office or registered agent, or bo Date	
the Stat	e of Florida. RE:			
the Stat	e of Florida. RE: Electronic Signature of Registered Agent		Date	
the Stati IGNATU PFFICER tte: ame: ddress:	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: PD () Delete BREDEN, DENNIS J 11469 WINGATE ROAD NORTH	ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECT	
the State IGNATU PFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: PD () Delete BREDEN, DENNIS J 11469 WINGATE ROAD NORTH JACKSONVILLE, FL 32218 VD () Delete WALDING, JOSEPH 1092 OVINGTON ROAD	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECT () Change () Addition	

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: DENNIS J BREDEN PD 05/16/2006