

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000967

Entity Name: VISION CHRISTIAN MINISTRIES, INC.

FILED
Feb 28, 2004
Secretary of State

Current Principal Place of Business:

5513 BRAIT AVE.
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 350265
JACKSONVILLE, FL 322350265 US

New Mailing Address:

FEI Number: 59-3362021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKLEY, LARRY SR.
5513 BRAIT AVE.
JACKSONVILLE, FL 32209

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: DP () Delete
Name: LOCKLEY, LARRY SR.
Address: 5513 BRAIT AVE.
City-St-Zip: JACKSONVILLE, FL 32209

Title: DV () Delete
Name: WILCOX, ARTHUR
Address: 1839 PALMDALE ST.
City-St-Zip: JACKSONVILLE, FL 32209

Title: STD () Delete
Name: JEFFERSON, KURT
Address: 12181 FORT CAROLINE RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: GOONITE, H M
Address: 138 CREEKWOOD CIRCLE
City-St-Zip: KINGSLAND, GA 31548

Title: D () Delete
Name: HEYWARD, CONNELL
Address: 3744 FOXCROFT RD
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LOCKLEY, LARRY L SR.
Address: 5513 BRAIT AVE.
City-St-Zip: JACKSONVILLE, FL 32209

Title: DV (X) Change () Addition
Name: WILCOX, ARTHUR H
Address: 1839 PALMDALE ST.
City-St-Zip: JACKSONVILLE, FL 32209

Title: STD (X) Change () Addition
Name: JEFFERSON, KURT A
Address: 12181 FORT CAROLINE RD.
City-St-Zip: JACKSONVILLE, FL 32225

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HEYWARD, CONNELL C
Address: 3744 FOXCROFT RD
City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KURT A. JEFFERSON

STD

02/28/2004

Electronic Signature of Signing Officer or Director

Date