NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## 1999

## DOCUMENT # N96000000968

1. Corporation Name

VISION CHRISTIAN CENTER, INC.

Principal Place of Business

5513 BRAIT AVE. JACKSONVILLE FL 32209 Mailing Address

12181 FORT CAROLINE RO JACKSONVILLE FL 32225-1617

HS

## FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90088 047 \*\*\*\*61.25

							1					_	
2. Principal P	lace of Business		2a. Mailing Address						Date Incorporated or Qualifed				
21			26						02/21/1996	,	<del></del>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.						FEI Number		_ <del></del>	plied For	
			27						59-3397470			Applicable	
City & State	е		City & State					5. C	Certifcate of Status Desired		\$8.75 A		
23		28									<del>`</del> i		
Zip	Country Zip				Country 30				Election Campaign Financing		\$5.00	- 1	
24						.01			Trust Fund Contribution  Name and Address of New I	Posistared :	Added t	o rees	
Name and Address of Current Registered Agent								10. <u>F</u>	Name and Address of New 1	zeñiarei en 1	· gont		
						81 Name							
LOCKLEY, LARRY SR.						82 Street Address (P.O. Box Number is Not Acceptable)							
5513 BRAIT AVE.						-							
JACKSON	VILLE FL 3220	9			83								
•						City				FL	85 Zip (	Code	
						· · ·		••			ebenging ito	ragistared	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered													
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.													
SIGNATURE										DATE		\	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere						t signature n	equired who		DDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12	
12.	OFFICERS AND DIRECTORS					1.1 TITLE				11021107111	Change	Addition	
TITLE	DP DELETE					1							
NAME	HEYWARD, CONNELL				1.2 NAME		ļ					1	
STREET ADDRESS	3744 FOXCROFT RD.					1.3 STREET ADDRESS						ł	
CITY-ST-ZIP	JACKSONVILLE FL 32257					1.4 CITY-ST-ZIP					Change	Addition	
TITLE	DV DELETE					2.1 TTTLE					□ cuange	Addition	
NAME	THOMAS, MEDERIT					2.2 NAME						-  -	
STREET ADDRESS	111 E 1ST ST., UNIT #47					2.3 STREET ADDRESS						ţ	
CITY-ST-ZIP	O/OROOTTICEE I E OFFICE					2.4 CITY-ST-ZIP					Change	Addition	
TITLE	DST □ DELETE 3.										Change	☐ Addition	
NAME	BENNETT, ALVIN						l					l	
STREET ADDRESS	12401 CASHEROS COURT COVE					3.3 STREET ADDRESS						}	
CITY-ST-ZIP	0.1001111222 12 0-220				3.4. CITY-ST-ZIP						По		
TITLE	☐ DELETE 4				4.1 TITLE						☐ Change	Addition	
NAME				4. 2 N	AME								
STREET ADDRESS					4.3 STREET ADDRESS							ļ	
CITY-ST-ZIP					TY-S	r-zip	<u> </u>		<u></u>		· ·		
TITLE			☐ DELET				D				Change	Addition	
NAME				5.2 N	AME		Tho	mp	DEON, TYRONG	A			
STREET ADDRESS 5.3					3.3 STREET ADDRESS		90	26	, Bridge creek	UKIVE.		{	
CITY-ST-ZIP	]	· · _			TY-S	T-ZIP	JAC	cks	oson Tyrone, Bridge creek ionville, Fr 32	<u> 44</u>			
TITLE			☐ DELET	FE 6.1 T	TLE				<del>-</del>		☐ Change	Addition	
NAME				6.2 N	AME							}	
STREET ADDRESS	}			6.3 5	TREE	ADDRESS						1	
CITY-ST-ZIP	[					T-ZIP							

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATIONE REPLYRED. 2

3-21-99

220-4397

Daytime Phone

POE037 (11/08)