

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000968

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** VISION CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

5513 BRAIT AVE.  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 350265  
JACKSONVILLE, FL 322350265 US

**New Mailing Address:**

**FEI Number:** 59-3397470

**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 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:** DP  
**Name:** GLOVER, LARRY S REV.  
**Address:** 2012 WAGES WAY  
**City-St-Zip:** JACKSONVILLE, FL 32218 US

**Title:** D  
**Name:** LOCKLEY, LARRY L REV.  
**Address:** 5513 BRAIT AVE.  
**City-St-Zip:** JACKSONVILLE, FL 32209 US

**Title:** STD  
**Name:** PEARSON, JR., NATHANIEL REV  
**Address:** 103 CHERRY POINT DR  
**City-St-Zip:** SAINT MARYS, GA 31558 US

I hereby 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 all other like empowered.

**SIGNATURE:** NATHANIEL PEARSON, JR.

STD

04/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date