


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

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N96000005787 1. Entity Name PENTECOSTAL CHURCH OF GOD IN CHRIST OF JACKSONVILLE, INC.	
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Principal Place of Business 1668 HIRAM STREET JACKSONVILLE FL 32209	Mailing Address 1668 HIRAM STREET JACKSONVILLE FL 32209
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-3436043	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TUCKER, DOLLIE MAE 1816 WEST 12TH STREET JACKSONVILLE FL 32209	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when constituting) DATE

FILE NOW: FEE IS \$61.25 Due By: May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PT TUCKER, ELDER J 1678 SEMINARY ST JACKSONVILLE FL 32209		<input type="checkbox"/> Delete
TITLE	T DOCTOR, ZEBOYE A 1926 W 3RD ST JACKSONVILLE FL 32209		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	ST TUCKER, RUBY 1678 SEMINARY STREET JACKSONVILLE FL 32209		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DRAO TUCKER, DOLLIE MAE 1816 WEST 12TH STREET JACKSONVILLE FL 32209		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DT ANDRES, RONALD L 2216 S. COLLEGE JACKSONVILLE FL 32209		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Dollie M Tucker* Dollie M. Tucker April 22, 2008 (904) 353-1620