

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000743

FILED
Mar 21, 2011
Secretary of State

Entity Name: COMMUNITY REVIVAL CENTER APOSTOLIC, INC.

Current Principal Place of Business:

1964 MCQADE STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 61883
JACKSONVILLE, FL 32236

New Mailing Address:

FEI Number: 59-3000424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, SR., ARTHUR L PASTOR
6030 SUDBURY AVENUE
JACKSONVILLE, FL 32210 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: PD
Name: ADAMS, SR., ARTHUR L
Address: 6030 SUDBURY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: S
Name: ADAMS, SONYA
Address: 7981 SHRIKE AVENUE
City-St-Zip: JACKSONVILLE, FL 32219

Title: C
Name: GREEN, MELISSA
Address: 1117 CALIENTE DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: T
Name: MEDLOCK, ANTHONY
Address: 7395 HIGH BLUFF RD. NORTH
City-St-Zip: JACKSONVILLE, FL 32244

Title: C
Name: GRANT, REBECCA
Address: 8136 VOONHINES RD
City-St-Zip: JACKSONVILLE, FL 32209

Title: C
Name: HARRIS, JANICE
Address: 6774 HEMA RD
City-St-Zip: JACKSONVILLE, FL 32209

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: ARTHUR L. ADAMS SR.

PD

03/21/2011

Electronic Signature of Signing Officer or Director

Date