2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001778

FILED May 02, 2005 Secretary of State

Entity Name: PHILIP R. COUSIN AFRICAN METHODIST EPISCOPAL CHURCH OF MANDARIN, INC.

Current Principal Place of Business: New Principal Place of Business:

2601 ORANGE PICKERS ROAD JACKSONVILLE, FL 32223

Current Mailing Address: New Mailing Address:

2601 ORANGE PICKERS ROAD JACKSONVILLE, FL 32223

FEI Number: 59-3378336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PARKER, AVA L
603 MARKET STREET
JACKSONVILLE, FL 32202 US
YOUNG, MCKINLEY BISHOP
40 EAST STATE STREET
JACKSONVILLE, FL 32202 US

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: MCKINLEY YOUNG 05/02/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 C
 () Delete
 Title:
 C
 (X) Change () Addition

 Name:
 ADAMS, JOHN H
 Name:
 YOUNG, MCKINLEY BISHOP

 Address:
 40 EAST STATE STREET
 Address:
 40 EAST STATE STREET

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32202

Title: Title: (X) Change () Addition () Delete MOSELEY, EUGENE E JR Name: MOSELEY, EUGENE E JR. Name: Address: 2601 ORANGE PICKERS ROAD Address: 2601 ORANGE PICKERS ROAD City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete Title: D (X) Change () Addition Name: COOK, FLORIDA H Name: COOPER, SHERMAN A

 Address:
 1478 WEST 11TH STREET
 Address:
 14967 FERN HAMMOCK DRIVE N.

 City-St-Zip:
 JACKSONVILLE, FL 32209
 City-St-Zip:
 JACKSONVILLE, FL 32258

Title: D () Delete Title: () Change () Addition

 Name:
 DALE, CATHERINE
 Name:

 Address:
 3853 OLYMPIC LANE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:

 Name:
 ROSS, CORÀ L
 Name:

 Address:
 5029 DALLEN LEA DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32208
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ELLISON, EDWARD
 Name:

 Address:
 3461 WHITE WING RD
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:

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: EUGENE E. MOSELEY, JR. P 05/02/2005