

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001817

FILED  
Apr 28, 2006  
Secretary of State

**Entity Name:** UNITY CHRISTIAN FELLOWSHIP MINISTRY, INC.

**Current Principal Place of Business:**

2667 EDISON AVENUE  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

2270 COMMONWEALTH  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

P.O. BOX 2333  
JACKSONVILLE, FL 32203 US

**New Mailing Address:**

**FEI Number:** 59-3416829      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JONES, FLOYD B  
4743 KERNAN MILL LN. E.  
JACKSONVILLE, FL 32224 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 ( ) Delete  
Name: JONES, FLOYD B  
Address: 4743 KERNAN MILL LANE EAST  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VSD ( ) Delete  
Name: JONES, TARRA F  
Address: 4743 KERNAN MILL LANE EAST  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: T ( ) Delete  
Name: CONNER, CHONITA TRUSTEE  
Address: 4743 KERNAN MILL LANE EAST  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: T ( ) Delete  
Name: COURTNEY, WILLIS TREASUR  
Address: 2667 EDISON AVE  
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: T ( ) Delete  
Name: GOODMAN, SHENAVIAN F TRUSTEE  
Address: 1943 WAGES WAY S  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: T ( ) Delete  
Name: REED, JOHN TRUSTEE  
Address: 2667 EDISON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32254 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: WRIGHT, SALLIE G TRUSTEE  
Address: 7740 SOUTHSIDE BLVD # 2601  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: FLOYD B. JONES

PD

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date