

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003772

FILED  
Mar 27, 2008  
Secretary of State

**Entity Name:** INTERCHURCH COALITION FOR ACTION, RECONCILIATION, AND EMPOWERMENT, INC.

**Current Principal Place of Business:**

118 EAST MONROE  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

2650 PARK ST.  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

118 EAST MONROE  
JACKSONVILLE, FL 32202

**New Mailing Address:**

2650 PARK ST.  
JACKSONVILLE, FL 32204

FEI Number: 59-3332540

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIEVERT-WAGNER, ROBERT  
118 EAST MONROE  
JACKSONVILLE, FL 32202 US

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

SIEVERT-WAGNER, ROBERT  
2650 PARK ST.  
JACKSONVILLE, FL 32204 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: ROBERT T. SIEVERT-WAGNER

03/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GEORGIA, GASTON  
Address: 12301 KERNAN FORST BLVD, UNIT #1505  
City-St-Zip: JACKSONVILLE, FL 32225

Title: P ( ) Delete  
Name: HAVENS, BRUCE DR  
Address: 431 N. UNIVERSITY BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32211

Title: T ( ) Delete  
Name: FLORES, TINA  
Address: 11453 SEDGEMOORE DR. W.  
City-St-Zip: JACKSONVILLE, FL 32223

Title: S ( ) Delete  
Name: JAMES, PROCTOR REV.  
Address: 11423 BRIDGES RD.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete  
Name: LAMAR, WILLIAM REV  
Address: 1231 TYLER ST.  
City-St-Zip: JACKSONVILLE, FL 32209

Title: S (X) Delete  
Name: MEISNER, PATRICIA  
Address: 8195 CASSIE RD.  
City-St-Zip: JACKSONVILLE, FL 32221

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

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

Title: P (X) Change ( ) Addition  
Name: HOLLADAY, DAVID  
Address: 2650 PARK ST.  
City-St-Zip: JACKSONVILLE, FL 32204

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

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

Title: S (X) Change ( ) Addition  
Name: MEISNER, PATRICIA  
Address: 8195 CASSIE RD.  
City-St-Zip: JACKSONVILLE, FL 32221

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT SIEVERT-WAGNER

D

03/27/2008

Electronic Signature of Signing Officer or Director

Date