

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003772

FILED  
Jan 16, 2009  
Secretary of State

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

**Current Principal Place of Business:**

2650 PARK ST.  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

2650 PARK ST.  
JACKSONVILLE, FL 32204

**New Mailing Address:**

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  
2650 PARK ST.  
JACKSONVILLE, FL 32204      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: P      ( ) Delete  
Name: GEORGIA, GASTON  
Address: 12301 KERNAN FORST BLVD, UNIT #1505  
City-St-Zip: JACKSONVILLE, FL 32225

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

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: S      ( ) 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:      ( ) 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:

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

LEAD

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date