

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 06, 2008**  
**Secretary of State**

DOCUMENT# N97000006512

**Entity Name:** GREATER MOUNT VERNON MISSIONARY BAPTIST CHURCH OF JACKSONVILLE, INC.**Current Principal Place of Business:**1462 PRINCE STREET  
JACKSONVILLE, FL 32209**New Principal Place of Business:****Current Mailing Address:**1462 PRINCE STREET  
JACKSONVILLE, FL 32209**New Mailing Address:****FEI Number:** 59-3527784**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WILLIAMS, ROWLAND V  
1125-1 CESERY BLVD  
JACKSONVILLE, FL 32211 US**Name and Address of New Registered Agent:**WILLIAMS, ROWLAND V  
6411-1 ARLINGTON ROAD  
JACKSONVILLE, FL 32211 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: ROWLAND V. WILLIAMS

05/06/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WILSON, CORETHA J  
Address: 4405 S. ROTH DRIVE  
City-St-Zip: JACKSONVILLE, FL 32209

Title: PD ( ) Delete  
Name: HAGANS, GROVER  
Address: 2419 SPIREA STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: TD ( ) Delete  
Name: LOVE, NELSON  
Address: 1573 KINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: ATWATER, GREGORY  
Address: 1279 KINGSLEY AVENUE  
City-St-Zip: ORANGE PARK, FL 32073

Title: SD ( ) Delete  
Name: SCOTT, WILLIAM  
Address: 1960 WEST 6TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: MCCALL, GEORGE T  
Address: 1138 W. 30TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

**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:

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: GROVER HAGANS

PD

05/06/2008

Electronic Signature of Signing Officer or Director

Date