

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002658

FILED
Mar 11, 2007
Secretary of State

Entity Name: JULINGTON BAPTIST CHURCH, INC.

Current Principal Place of Business:

12740 SNYDER STREET
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

12740 SNYDER STREET
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-2717279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAPLES, THOMAS
712 TORREY PINE CIRCLE N
JACKSONVILLE, FL 32218 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: D () Delete
Name: MCCLAIN, NATHANIEL J SR.
Address: 2827 SELAWICK LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: STAPLES, THOMAS
Address: 712 TORREY PINE CIRCLE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: MARSHER, BOYD
Address: 5338 SANTA MONICA BLVD N
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: JENNINGS, SIDNEY
Address: 3224 CLAREMONT RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: CASSIUS, TERRY
Address: 289 SUMMER SPRINGS CT
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: GLOVER, CHRISTINE
Address: 5502 LONDON LK. DR
City-St-Zip: JACKSONVILLE, FL 32258

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: D (X) Change () Addition
Name: BOYD, RAYMOND
Address: 5338 SANTA MONICA BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change () Addition
Name: JEFFERSON, TYRONE
Address: 2026 WESTMONT STREET
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change () Addition
Name: MCPHERSON, GLORIA
Address: 6626 NATHAN DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32216

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: THOMAS STAPLES

REV.

03/11/2007

Electronic Signature of Signing Officer or Director

Date