

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005017

FILED  
Apr 12, 2009  
Secretary of State

Entity Name: BARNABAS INTERNATIONAL, INC.

## Current Principal Place of Business:

1120 HIDEAWAY DR. N.  
JACKSONVILLE, FL 32259

## New Principal Place of Business:

## Current Mailing Address:

450-106 STATE ROAD 13 N. #185  
JACKSONVILLE, FL 32259 US

## New Mailing Address:

FEI Number: 59-3602867

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLEMAN, PATRICK D  
800 WEST MONROE STREET  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

COLEMAN, PATRICK D  
50 N. LAURA STREET  
SUITE 1100  
JACKSONVILLE, FL 32202 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: JOANNE HICKOX

04/12/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HICKOX, JOANNE  
Address: 800 WEST MONROE STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D ( ) Delete  
Name: HAUG, JAY  
Address: 814 A HWY A1A NORTH, STE 100  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete  
Name: MOORE, SHELLEY  
Address: 610 FLORIDA BLVD.  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: SD ( ) Delete  
Name: WHITE, STACEY  
Address: 7825 BAYMEADOWS WAY SUITE 300B  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete  
Name: FERRELLI, PAM  
Address: 8925 WESTERN WAY, SUITE 15  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change ( ) Addition  
Name: HICKOX, JOANNE K ED  
Address: 1120 HIDEAWAY DR. N.  
City-St-Zip: JACKSONVILLE, FL 32259

Title: MR. (X) Change ( ) Addition  
Name: BRAUCH, TED PRES.  
Address: 24541 INDIAN MIDDEN WAY  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MRS. (X) Change ( ) Addition  
Name: MOORE, SHELLEY TRES.  
Address: 610 FLORIDA BLVD.  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: MS. (X) Change ( ) Addition  
Name: WHITE, STACEY SEC.  
Address: 7892 BAYMEADOWS WAY  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MRS. (X) Change ( ) Addition  
Name: FERRELLI, PAM DIR  
Address: 8925 WESTERN WAY, SUITE 15  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MR. ( ) Change (X) Addition  
Name: BOSTON, GERALD DIR.  
Address: 325 ROYAL PALM DR.  
City-St-Zip: ATLANTIC BEACH, FL 32233

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: JOANNE HICKOX

MS.

04/12/2009

Electronic Signature of Signing Officer or Director

Date