

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006455

FILED
Apr 28, 2008
Secretary of State

Entity Name: KINGS ROAD CHURCH OF CHRIST, INC.

Current Principal Place of Business:

2121 KINGS ROAD
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 40502
JACKSONVILLE, FL 32203 US

New Mailing Address:

FEI Number: 50-2077002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABTREE, R R
8375 DIX ELLIS TRAIL
SUITE 401
JACKSONVILLE, FL 32256 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: HOOKER, ALFRED L SR
Address: 1451 ROSE HILL DR W
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: V () Delete
Name: TIMMONS, CHARLES
Address: 143 W 43RD ST
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: D () Delete
Name: MCMORRIS, LILVEGAS
Address: 12250 ATLANTIC BLVD, #2102
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: V () Delete
Name: HOOKER, ESTELLA
Address: 1451 ROSE HILL DR W
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: D () Delete
Name: SMITH, EUNICE
Address: 2802 NEPTUNE ST
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: D () Delete
Name: BRYANT, PRISCILLA S
Address: 4611 ABERDARE AVE
City-St-Zip: JACKSONVILLE, FL 32208 US

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
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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: ALFRED L HOOKER

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date