

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719957

**Entity Name:** THE GOOD NEWS BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

2600 ST.JOHNS BLUFF RD. SO.  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

2600 ST.JOHNS BLUFF RD. SO.  
JACKSONVILLE, FL 32246 US

**FEI Number:** 59-1778006

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CRAWFORD, DEBBIE  
2600 ST.JOHNS BLUFF RD. SO.  
JACKSONVILLE, FL 32246 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:** DEBBIE CRAWFORD

04/20/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name SUDDUTH, SHERMAN  
Address 4001 UNIVERSITY BLVD N.  
City-State-Zip: JACKSONVILLE FL 32277

Title D  
Name MAYLE, TRACY  
Address 1923 GAMEWELL RD.  
City-State-Zip: JACKSONVILLE FL 32211

Title D  
Name BAILEY, STEPHEN P  
Address 12482 MONARCH COURT  
City-State-Zip: JACKSONVILLE FL 32225

Title VPD  
Name CEMENTE, JOHN  
Address 2298 CORTEZ RD.  
City-State-Zip: JACKSONVILLE FL 32246

Title SECRETARY, DIRECTOR  
Name FOSTER, VICKI  
Address 803 LINCOLN ROAD  
City-State-Zip: NEPTUNE BEACH FL 32266

Title TREASURER, DIRECTOR  
Name CRAWFORD, DEBBIE  
Address 2485 OAKVIEW DRIVE  
City-State-Zip: JACKSONVILLE FL 32246

*I hereby 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 all other like empowered.*

**SIGNATURE:** DEBBIE CRAWFORD

**TREASURER**

04/20/2023

Electronic Signature of Signing Officer/Director Detail

Date