

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759877

Entity Name: FIRST COAST CHRISTIAN CENTER OF THE ASSEMBLIES OF
GOD, INC. OF THE CITY OF JACKSONVILLE, STATE OF FLORIDA**FILED**
Mar 14, 2019
Secretary of State
1942854652CC**Current Principal Place of Business:**2724 NEW BERLIN RD
JACKSONVILLE, FL 32226-1756**Current Mailing Address:**2724 NEW BERLIN RD
JACKSONVILLE, FL 32226-1756 US**FEI Number: 59-1944384****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**FRUSCELLA, PERRY M
2724 NEW BERLIN RD
JACKSONVILLE, FL 32226 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: PERRY M. FRUSCELLA****03/14/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT AND DIRECTOR

Name FRUSCELLA, PERRY M

Address 3040 HUCKLEBERRY LANE

City-State-Zip: JAX FL 32226

Title TREASURER AND DIRECTOR

Name TURNER, RICHARD STEVEN

Address 10167 LAKE VIEW RD. W.

City-State-Zip: JACKSONVILLE FL 32225

Title SECRETARY AND DIRECTOR

Name BISSO, PATRICK M

Address 1432 ARENDS RD

City-State-Zip: JACKSONVILLE FL 32218

Title DIRECTOR

Name CHADWELL, HAROLD L II

Address 13113 PEACEFUL RD

City-State-Zip: JACKSONVILLE FL 32226

Title DIRECTOR

Name AFLLEJE, WAYNE V

Address 103 RIVER BEND DR

City-State-Zip: SAINT MARYS GA 31558

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: PERRY M. FRUSCELLA**PRESIDENT AND
DIRECTOR****03/14/2019**

Electronic Signature of Signing Officer/Director Detail

Date