

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000003723

**Entity Name:** SPRINGHILL COMMUNITY EMPOWERMENT CENTER, INC.

**Current Principal Place of Business:**

11046 HARTS RD  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

11046 HARTS RD  
JACKSONVILLE, FL 32218

**FEI Number: 59-3718487**

**Certificate of Status Desired: Yes**

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

SMITH, EARLENE D  
8774 LANCASHIRE DR  
JACKSONVILLE, FL 32219 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name JACKSON, MICHAEL A  
Address 11046 HARTS ROAD  
City-State-Zip: JACKSONVILLE FL 32218

Title T  
Name WALKER, ROBIN  
Address 11482 OAK BANK COURT  
City-State-Zip: JACKSONVILLE FL 32218

Title S  
Name SIMMONS-JOHNSON, TAWANDA  
Address 9013 BRIGDECREEK DR  
City-State-Zip: JACKSONVILLE FL 32244

*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: REV MICHAEL A JACKSON**

**PASTOR/PRESIDENT**

**01/12/2014**

Electronic Signature of Signing Officer/Director Detail

Date