## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011755

Entity Name: IMPACT CHRISTIAN CENTER, INC.

**Current Principal Place of Business:** 

7422 ATLANTIC BLVD JACKSONVILLE, FL 32211

**Current Mailing Address:** 

7422 ATLANTIC BLVD JACKSONVILLE, FL 32211

FEI Number: 27-4315263 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILLIAMS, RODERICK A PASTOR 7422 ATLANTIC BLVD JACKSONVILLE, FL 32211 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: RODERICK WILLIAMS 02/26/2013

Electronic Signature of Registered Agent

Date

**FILED** Feb 26, 2013

**Secretary of State** 

CC6114065020

Officer/Director Detail:

Title Title

WILLIAMS, RODERICK PASTOR Name Name WILLIAMS, TAKETA PASTOR

7422 ATLANTIC BLVD Address 7422 ATLANTIC BLVD Address

City-State-Zip: JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 City-State-Zip:

Title D Title D

Name MURRAY, MONIQUE Name DAVIS, MELTONYA ELDER Address 7422 ATLANTIC BLVD Address 7422 ATLANTIC BLVD JACKSONVILLE FL 32211 City-State-Zip:

Title

City-State-Zip:

RUISE, GLENDA ELDER Name 7422 ATLANTIC BLVD Address City-State-Zip: JACKSONVILLE FL 32211

JACKSONVILLE FL 32211

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: RODERICK WILLIAMS **PASTOR** 

Electronic Signature of Signing Officer/Director Detail

02/26/2013 Date