

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14742

**Entity Name:** JESUS CHRIST COMMUNITY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

918 IONIA ST.  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

PO BOX 9302.  
JACKSONVILLE, FL 32208 US

**FEI Number: 59-2797800**

**Certificate of Status Desired: Yes**

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

GREEN, BARBARA M  
9634 SPOTTSWOOD RD W  
JACKSONVILLE, FL 32208 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 GAILYARD, REV. SAMUEL E.  
Address 812 TOWERING OAKS WAY  
City-State-Zip: APOPKA FL 32712

Title SD  
Name GAILYARD, LINDA  
Address 7360 AMANDA CROSSING DRIVE  
SOUTH  
City-State-Zip: JACKSONVILLE FL 32244

Title CT  
Name GAILYARD, SOLOMON  
Address 7360 AMANDA CROSSING DRIVE  
SOUTH  
City-State-Zip: JACKSONVILLE FL 32244

Title SSTD  
Name GREEN, BARBARA M  
Address 9634 SPOTTSWOOD ROAD WEST  
City-State-Zip: JACKSONVILLE FL 32208

Title APD  
Name KELLY, THEODORE REV.  
Address 3576 WEST MAIN STREET  
City-State-Zip: FOLKSTON GA 31537

Title STD  
Name GREEN, HARRIETT E  
Address 4501 KEN KNIGHT DRIVE NORTH  
City-State-Zip: JACKSONVILLE FL 32209

*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: BARBARA M. GREEN**

**REGISTERED  
AGENT/SSTD**

**03/08/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date