

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19385

Entity Name: CHRISTIAN DEVELOPMENT CENTER OF NE FL, INC.

Current Principal Place of Business:

1841 EVERGREEN AVENUE
JACKSONVILLE, FL 32206

Current Mailing Address:

1841 EVERGREEN AVENUE
JACKSONVILLE, FL 32206 US

FEI Number: 59-2756832

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREECH, SYLVIA R
725 CHERRY BARK DR. N
JACKSONVILLE, FL 32218 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 POLLARD, DESSIE B JR
Address 9453 SAPPINGTON AVE.
City-State-Zip: JACKSONVILLE FL 32208

Title VD
Name POLLARD, PAULA L
Address 9453 SAPPINGTON AVE.
City-State-Zip: JACKSONVILLE FL 32208

Title SD
Name PRESHA, GERALDINE P
Address 1052 E. 10TH STREET
City-State-Zip: JACKSONVILLE FL 32206

Title TD
Name CASE, BARRY C
Address 11210 YOUNG ROAD
City-State-Zip: JACKSONVILLE FL 32218

Title DD
Name CASE, MELISSA P
Address 11210 YOUNG ROAD
City-State-Zip: JACKSONVILLE FL 32218

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: DESSIE B POLLARD

PD

04/02/2014

Electronic Signature of Signing Officer/Director Detail

Date