

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22740

Entity Name: THE WESTSIDE CHRISTIAN FAMILY CHAPEL, INC.**Current Principal Place of Business:**4541-8 SHIRLEY AVENUE
JACKSONVILLE, FL 32210-2069**Current Mailing Address:**4541-8 SHIRLEY AVENUE
JACKSONVILLE, FL 32210-2069 US**FEI Number:** 59-2857371**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLEMAN, PATRICK D.
800 WEST MONROE STREET
JACKSONVILLE, FL 32202 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	DIRECTOR
Name	COLEMAN, PATRICK D
Address	4834 ALGONQUIN AVE
City-State-Zip:	JACKSONVILLE FL 32210

Title	D
Name	CRENSHAW, MCCARTHY JR
Address	3855 ST JOHNS AVE
City-State-Zip:	JACKSONVILLE FL

Title	D
Name	MITCHELL, KENNETH R
Address	5207 ORTEGA GLEN DRIVE
City-State-Zip:	JACKSONVILLE FL 32210

Title	D
Name	ALLCORN, FRANK
Address	4287 VENETIA BLVD.
City-State-Zip:	JACKSONVILLE FL 32210

Title	D
Name	BROOKE, ALLAN FII
Address	101 E ADAMS ST
City-State-Zip:	JACKSONVILLE FL 32202

Title	D
Name	ROBERTS, JIMMY D
Address	7325 ORTEGA HILLS DRIVE
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: KENNETH R MITCHELL**DIRECTOR****01/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date