

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28274

Entity Name: WESTSIDE CHRISTIAN OUTREACH, INC.**Current Principal Place of Business:**1044 WOLFE STREET
JACKSONVILLE, FL 32205**Current Mailing Address:**940 TALBOT AVE.
JACKSONVILLE, FL 32205-5350 US**FEI Number: 59-2909109****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BOZEMAN, ELIZABETH G.
940 TALBOT AVE.
JACKSONVILLE, FL 32205-5350 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: ELIZABETH G. BOZEMAN****02/22/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name AXTELL, DOUG
Address 1044 WOLFE STREET
City-State-Zip: JACKSONVILLE FL 32205

Title VP
Name VAL, LYMAN
Address 1044 WOLFE STREET
City-State-Zip: JACKSONVILLE FL 32205

Title SECRETARY
Name FREEMAN, PAT
Address 1044 WOLFE STREET
City-State-Zip: JACKSONVILLE FL 32205

Title DIRECTOR
Name DOUG AXTELL
Address 1044 WOLFE STREET
City-State-Zip: JACKSONVILLE FL 32205

Title TREASURER
Name BOZEMAN, ELIZABETH G
Address 940 TALBOT AVE.
City-State-Zip: JACKSONVILLE FL 32205-5350

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: ELIZABETH G BOZEMAN**TREASURER****02/22/2020**

Electronic Signature of Signing Officer/Director Detail

Date