2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000001855

FILED Apr 09, 2004 8:00 am Secretary of State

04-09-2004 90057 026 ****70.00

1. Entity Nam OAK GRO		TIST CHURCH OF	JACKSONVIL	LE, INC.			Ŭ				
Principal Place of Business 5201 CEDAR POINT RD JACKSONVILLE, FL 32226 Mailing Address 5201 CEDAR POINT RD JACKSONVILLE, FL 32226									10293	375	
Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01192004 _{CI}	hg-NP	CR2E03	7 (10/03)	
City & State		City & State			4. FEI Number Applied For 59-3532981 Not Applicable						
Zip		Country	Zip ,	c	Country		5. Certificate of St		<u> </u>	8.75 Add Fee Require	
					Name	7	- 7. Name and Add			gent	<u> </u>
MATTHEWS, JAMES REV 4800 CEDAR PT RD				Street Address (P.O. Box Number is Not Acceptable).					-		
JACKSONVILLE, FL 32226					/3	<u> </u>	DECCES,	40128 (<u>rzye</u>		
The above named entity submits this statement for the purpose of changing its rec						JACKSONVILLE FL Zin Code 32218					
	ions of regist		tne purpose of char	nging its registe	ered office or	register	ed agent, or both, in	the State of Flori	da. Tam ta	amiliar with,	and accept
COMMITTEE David H. Beckham - Pasons								,	3/3//	04	
SIGNATURE	Jonature, typed	or print of fame of restared agent a	nd title i applicable.	(NOTE: Registe	ered Agent signatu	re required	when reinstating)		DATE		
		·		tion Campaign t Fund Contrib	_		\$5.00 May Be Added to Fees	Florid	la Depart	payable t ment of S	tate 💉 🍦
10.	Due by M	·	Trus	t Fund Contrib	oution.			Florid	la Depart	ment of S	tate
10.	Due by M	OFFICERS AND DIR	Trus	t Fund Contrib	oution. 1	<u> </u>	Added to Fees	Florid ES TO OFFICERS	la Depart	ment of S	tate 💉 🍦
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10.	Due by M POWELL, 5201 CED	OFFICERS AND DIR	Trus	t Fund Contrib	oution. 1	Bu 135	Added to Fees ADDITIONS/CHANG ADDITIONS/CHANG ADDITIONS/CHANG	Florid ES TO OFFICERS LL ROAD	ia Depart	ment of S	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David H. Bell Jan David H. Beckham 3/31/64 904-261-3617

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #