

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701050

1. Entity Name

FOREST CHRISTIAN CHURCH OF JACKSONVILLE, FLORIDA

Principal Place of Business

13733 N. MAIN STREET
JACKSONVILLE FL 32218
US

Mailing Address

P.O. BOX 26343
JACKSONVILLE FL 32226-6343
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2074191

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUNTING, JACK
4453 BURGESS RD
CALLAHAN FL 32011

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE C
NAME BUNTING, JACK
STREET ADDRESS 4453 BURGESS ROAD
CITY-ST-ZIP CALLAHAN FL 32011 ☒ Delete

TITLE C
NAME PAUL TURNER
STREET ADDRESS 2364 New Berlin Road
CITY-ST-ZIP Jacksonville, FL 32218 ☒ Change ☐ Addition

TITLE T
NAME HARRIS, ANNE
STREET ADDRESS 1832 BARD DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32218 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ATD
NAME HARRIS, DEWEY
STREET ADDRESS 10404 BRIARCLIFF RD S
CITY-ST-ZIP JACKSONVILLE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BOATRIGHT, WALTER JR.
STREET ADDRESS 3035 MARLEE
CITY-ST-ZIP CALLAHAN FL 32001 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BUNTING, SHIRLEY
STREET ADDRESS 4453 BURGESS ROAD
CITY-ST-ZIP CALLAHAN FL 32011 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME DAVIS, CHRYSTEEN S
STREET ADDRESS 11406 AMERICANA LANE
CITY-ST-ZIP JACKSONVILLE FL 32218 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

ANNE HARRIS

3/1/01

904-714-3200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)