2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2002 8:00 am Secretary of State **DOCUMENT # 701050** 1. Entity Name FOREST CHRISTIAN CHURCH OF JACKSONVILLE, FLORIDA 05-22-2002 90125 011 ****61.25 Principal Place of Business Mailing Address 13733 N. MAIN STREET P.O. BOX 26343 JACKSONVILLE FL 32218 JACKSONVILLE FL 32226-6343 00140 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2074191 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BUNTING, JACK** 4453 BURGESS RD CALLAHAN FL 32011 City 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 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE □ Delete TITI F (9/01)☐ Change ☐ Addition NAME TURNER, PAUL NAME STREET ADDRESS 2364 NEW BERLIN ROAD STREET ADDRESS **CR2E037** CITY-ST-7IP JACKSONVILLE FL 32218 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME HARRIS, ANNE NAME STREET ADDRESS 1832 BARD DRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL-32218 CITY-ST-ZIP TITLE ATD ☐ Delete TITLE ☐ Change ☐ Addition NAME HARRIS, DEWEY STREET ADDRESS 10404 BRIARCLIFF RD S STREET ADDRESS CITY-ST-ZIP Jacksonville fl CITY-ST-ZIP TITLE D ☐ Delete TITLE ☐ Change ☐ Addition NAME BOATRIGHT, WALTER JR. NAME STREET ADDRESS 3035 MARLEE STREET ADDRESS CITY-ST-ZIP CALLAHAN FL 32001 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME Bunting, Shirley NAME STREET ADDRESS 4453 BURGESS ROAD STREET ADDRESS CITY-ST-ZIP CALLAHAN FL 32011 CITY-ST-ZIP TITLE Delete TITLE Secretary ☐ Change X Addition

<u>Yulee FL 32097</u> 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

CITY-ST-7IP

STREET ADDRESS

NAME

Lisa Pfiester

3762 Laffites Way

SIGNATURE:

DAVIS, CHRYSTEEN S

11406 AMERICANA LANE

JACKSONVILLE FL 32218

NAME

STREET ADDRESS

CITY-ST-ZIP

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR