

FILE NOW: FILING FEE IS \$61.25

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Mar 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moynihan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **702143** (9)

1. Corporation Name

JACKSONVILLE METHODIST HOME, INC.



Principal Place of Business 25 STATE ROAD 13 JACKSONVILLE FL 32259-2842	Mailing Address 25 STATE ROAD 13 JACKSONVILLE FL 32259-2842
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3. Date Incorporated or Qualified

03/14/1961

4. FEI Number

59-0872675

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 **30**

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**SNOWDEN, R. GRADY JR.
25 STATE ROAD 13
JACKSONVILLE FL 32259**

10. Name and Address of New Registered Agent

81 Name **Michael McClernon**
82 Street Address (P.O. Box Number is Not Acceptable)
25 st. Rd. 13
83
84 City **Jacksonville** **FL** **85** Zip Code **32259**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Michael McClernon

February 12, 1998

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **CD**
MULLINS, MARK
 STREET ADDRESS **8933 WESTERN WAY STE. 20**
 CITY-ST-ZIP **JACKSONVILLE FL 32256**

TITLE ☒ DELETE

NAME **VP**
WILES, HERBIE
 STREET ADDRESS **P O DWR 3067**
 CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE ☐ DELETE

NAME **2VPD**
MASSEY, MARY A
 STREET ADDRESS **6750 EPPING FOREST WAY N. 106**
 CITY-ST-ZIP **JACKSONVILLE FL 32217**

TITLE ☒ DELETE

NAME **STD**
CATLIN, HAROLD H
 STREET ADDRESS **1000 FIRST UNION TOWER 225 WATER ST.**
 CITY-ST-ZIP **JACKSONVILLE FL 32202-4458**

TITLE ☒ DELETE

NAME **VTD**
JORDAN, LARRY
 STREET ADDRESS **445-26 STATE RD. 13 STE. 347**
 CITY-ST-ZIP **JACKSONVILLE FL 32259**

TITLE ☒ DELETE

NAME **P**
SNOWDEN, GARY R JR.
 STREET ADDRESS **25 ST. RD. 13**
 CITY-ST-ZIP **JACKSONVILLE FL 32259**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

NAME **V/D**
Mary Louise Dungey
 STREET ADDRESS **1 San Jose Place Suite 7**
 CITY-ST-ZIP **Jacksonville, FL 32259**

3.1 TITLE ☒ Change ☐ Addition

NAME **S/D**
Mary ALice Massey
 STREET ADDRESS **6700 Epping Forest Way No. 106**
 CITY-ST-ZIP **Jacksonville, FL 32217**

4.1 TITLE ☐ Change ☒ Addition

NAME **T/D**
Tim Robinson
 STREET ADDRESS **8577 Walden Glen Drive**
 CITY-ST-ZIP **Jacksonville, FL 32256**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100002444341
-03/02/98--01125--002
*****122.50**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary Louise Dungey

2/13/98

904-287-7300

CR2E037 (10/97)