FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 707545

(0)

UNITARIAN UNIVERSALIST CHURCH OF JACKSONVILLE, I NC.

Principal Place of Business Mailing Address						-{			
7405 ARLINGTO	N EXPRESSWAY	7405 ARLINGTON EXPRES	ARLINGTON EXPRESSWAY						
JACKSONVILLE	FL 32211	JACKSONVILLE FL 32211-5 US	950						
		00				3. Date Incorporated or Qualified 07/07/1964	3a. Date of Last 1 02/12/19		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21		26				50-0625826	l N	lot Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	4	Additional	
City & Stat	0	City & State						Required	
23	to .	28				Election Campaign Financing Trust Fund Contribution		May Be I to Fees	
Zip	Country	Zip	Count	ry				·	
24	25 29 30		30	 		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re			
			8	1 Name	9				
TOWERS	s, robert jr.		8	2 Street	t Addres	ss (P.O. Box Number is Not Accepta	ble)		
	NALD ST.							 	
JACKSO	NVILLE FL 32205		8	3					
			ā	4 City			FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 617.0	1502 and 617.1508. Florida Statu	ites, the abo	ve-name	d corpor	ration submits this statement for the	purpose of changing	its registered	
office or r	registered agent, or both, in the St	ate of Florida, Such change was	authorized	by the co	rporatio	ration submits this statement for the n's board of directors. I hereby acce	pt the appointment a	s registered	
SIGNATURE	in tarnio with and accept the ob	ngadono or, occitori o vi locoo, r	iorida Olalbi	ua.					
SIGNATURE	Stgnature, typed or printed name of registered	agent and title if applicable (NO	TE: Registered A	gent signatu	re required	when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI			
TITLE	PD ST LLODGE ALAPY OLAPPE			1.1 TITLE			La Change	Addition	
NAME PROFEST LEADERS	VAN DER HORST, MARY C	LAIRE	1.2 NAM		Çį	arence Baker	_ •		
STREET ADDRESS	3403 ROSEMARY ST JACKSONVILLE FL			ET ADDRESS	12	742 Hunt Club Rocksonville, F1 3	20 2224		
CITY-ST-ZIP TITLE	PD PD	☐ DELETE	1.4 CITY 2.1 TITL		Ua	CKBOHAITIE, ET 3	□ Change	Addition	
NAME				2.1 MLE 2.2 NAME			C change		
STREET ADDRESS	1612 COPELAND ST			Et address	;				
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY						
TITLE			3.1 TITLE		1	+	☐ Change	Addition	
NAME	NISS, JIM		3.2 NAM	Ε					
STREET ADDRESS	708 DAVIS ST		3.3 STRE	et address	;				
CITY-ST-ZIP	NEPTUNE BCH FL		3.4, CITY		_			···	
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAX			•			
STREET ADDRESS			4	ET ADDRESS	'			,	
CITY-ST-7IP TITLE		DELETE	4.4 CITY 5.1 TITL		+		☐ Change	Addition	
NAME		bend section	5.2 NAM						
STREET ADDRESS				et address	,				
CITY-ST-7IP			5.4 DITY						
THLE		DELETE	6.1 TITL		 		☐ Change	Addition	
NAMÉ			6.2 NAM	E			•		

63 STREET ADDRESS 6.4 City-St-ZIP

STREET ADDRESS

CITY-SI-ZIP

SIGNATURE: JAMES F. N.

14. I do 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.

FILED

Mar 04 1997 8:00am

Secretary of State