

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707545

FILED  
Apr 16, 2008  
Secretary of State

**Entity Name:** UNITARIAN UNIVERSALIST CHURCH OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

7405 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

7405 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

FEI Number: 59-0996088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROMLEY, TRELLA  
13058 HIGHLAND GLEN WAY SOUTH  
JACKSONVILLE, FL 32246 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHACTER, DAVID  
Address: 426 ORANGE BLUFF ROAD  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: V ( ) Delete  
Name: RACINE, PETER  
Address: 7204 HANSON DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: T ( ) Delete  
Name: BROMLEY, TRELLA  
Address: 13058 HIGHLAND GLEN WAY SOUTH  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: S ( ) Delete  
Name: RICKER, ALICE  
Address: 1950 PAINE AVE #54  
City-St-Zip: JACKSONVILLE, FL 32210 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SHACTER, DAVID  
Address: 426 ORANGE BLUFF AVE  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID SHACTER

P

04/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date