

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714086

1. Entity Name

THE NORTHSORE PRESBYTERIAN CHURCH OF JACKSONVIL

FILED
Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90011 036 ****61.25

Principal Place of Business

Mailing Address

7700 PEARL ST
JACKSONVILLE FL 32208

7700 PEARL ST
JACKSONVILLE FL 32208-3818

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1274418

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

HAYNES, FRANK
1776 CHESTER RD
YULEE FL 32097

Name Ervin Hillard

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

11464 Avery Dr.

City Jacksonville

FL

Zip Code 32218

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



Ervin Hillard, Director (SET) 07/03/00

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 D ☒ Delete
NAME HAYNES, F M
STREET ADDRESS 1776 CHESTER RD
CITY-ST-ZIP YULEE FL 32097

TITLE D ☐ Change ☒ Addition
NAME David McCall
STREET ADDRESS 711 Ann Street
CITY-ST-ZIP St. Marys, Georgia 31558

TITLE STD ☐ Delete
NAME HILLARD, ERVIN
STREET ADDRESS 11464 AVERY DR
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE D ☒ Delete
NAME HAMRICK, FRED
STREET ADDRESS 11344 AVERY DR
CITY-ST-ZIP JACKSONVILLE FL 32218

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

TITLE D ☐ Delete
NAME FOOSHEE, LESTER
STREET ADDRESS 495 W 68TH ST
CITY-ST-ZIP JACKSONVILLE FL 32208

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

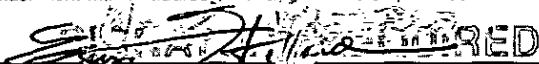
TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 power like empowered.

SIGNATURE:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/00

Date

(904) 768-1551

Daytime Phone #

CR2E037 (9/99)

Attachment
D# C03069
D0068936

June 30, 2000

Dear Sirs:

Please accept this payment for
corporation fees with our apologies for
the delay in payment.

This oversight was the result of
recent staff changes.

The Staff of
Northshore Presbyterian Church