

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **724561** (6)

1. Corporation Name

DOWLING PARK HOME, INC. THE



Principal Place of Business

Mailing Address

**ADVENT CHRISTIAN VILLAGE
P.O. BOX 4307
DOWLING PARK FL 32060**

**ADVENT CHRISTIAN VILLAGE
P.O. BOX 4307
DOWLING PARK FL 32060**

3. Date Incorporated or Qualified
10/16/1972

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-1420975

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MOXLEY, JOHN
2320 NE 2 ST STE 4
OCALA FL 32670**

81 Name

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

83

84 City

FL

85 Zip Code

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

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 **D** ☐ DELETE
NAME **DUGGAR, MARGARET LYNN**
STREET ADDRESS **1018 THOMASVILLE RD., SUITE 110**
CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE **CD** ☐ DELETE
NAME **NICKERSON, W C JR**
STREET ADDRESS **464 BROOK ST**
CITY-ST-ZIP **WESTBROOK, ME 00000**

TITLE **D** ☐ DELETE
NAME **SHERRILL, BRYCE H**
STREET ADDRESS **1122 KNOX SHERRIL RD**
CITY-ST-ZIP **LENOIR, NC 00000**

TITLE **P** ☒ DELETE
NAME **CARTER, J POMEROY**
STREET ADDRESS **RT 9 BOX 120**
CITY-ST-ZIP **LIVE OAK, FL 00000**

TITLE **S** ☐ DELETE
NAME **HUMBLES, JAMES L**
STREET ADDRESS **ADVENT CHRISTIAN VILLAGE**
CITY-ST-ZIP **DOWLING PARK FL**

TITLE **T** ☐ DELETE
NAME **NICKERSON, KIRBY**
STREET ADDRESS **P.O. BOX 4327 (N/A)**
CITY-ST-ZIP **DOWLING PARK FL 32060**

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 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE **S/P** ☒ Change ☐ Addition
5.2 NAME **Humbles, James L.**
5.3 STREET ADDRESS **Advent Christian Village, PO Box 4307, N/A**
5.4 CITY-ST-ZIP **Dowling Park, FL 32060**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *James L. Humbles*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James L. Humbles

4-26-96

904/658-3333

Date

Daytime Phone #

CR2E037 (12/95)