

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 16, 2001 8:00 am**
Secretary of State

04-04-2001 90121 009 ****61.25

DOCUMENT # 728428

1. Entity Name

ADVISORY BOARD OF THE NORTH FLORIDA DISTRICT, CH

Principal Place of Business

4741 ATLANTIC BLVD
STE E-4
JAX FL 32207
US

Mailing Address

4741 ATLANTIC BLVD
STE E-4
JAX FL 32207
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6543225

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

GUNTER, D MOODY
12508 MASTERS RIDGE DR
BOX 519
JACKSONVILLE FL 32225

7. Name and Address of New Registered Agent

Name ORVILLE W. JENKINS, JR
Street Address (P.O. Box Number is Not Acceptable)
4741 ATLANTIC BLVD, SUITE E-4
City JACKSONVILLE FL Zip Code 32207

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

ORVILLE W. JENKINS, JR.

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

Orville W. Jenkins, Jr.

(NOTE: Registered Agent signature required when reinstating)

4/12/01

DATE

FILE NOW:
FEE IS \$81.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> Delete
NAME	JENKINS, ORVILLE JR.	
STREET ADDRESS	3930 UNIVERSITY BLVD S	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	PATRICK, MARK	
STREET ADDRESS	4040 WOODCOCK DRIVE STE 230	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HORNER, PAUL	
STREET ADDRESS	7830 NW 35TH PLACE	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	GUNTER, D MOODY	
STREET ADDRESS	12508 MASTERS RIDGE DR, BOX 519	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ACHESON, CHARLES D.	
STREET ADDRESS	1420 TRAVELERS PALM	
CITY-ST-ZIP	EDGEWATER FL 32132	
TITLE	D	<input type="checkbox"/> Delete
NAME	SAWYER, ED	
STREET ADDRESS	38328 CROWN PL	
CITY-ST-ZIP	LADYLAKE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ORVILLE W JENKINS JR	
STREET ADDRESS	4741 ATLANTIC BLVD STE 54	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	32207	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOUG MILLS	
STREET ADDRESS	3675 COVINTH DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL 32308	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 other like empowered.

SIGNATURE:**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

Attachment Doc# 728428
36650



NORTH FLORIDA DISTRICT
CHURCHES OF THE NAZARENE

April 12, 2001

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Subject: Advisory Board of the North Florida District, Church of the Nazarene

Reference Number: 728428

Please be advised that we have the following additional members of our Advisory Board
which space did not allow us to list:

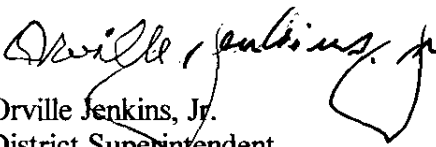
D
Brincefield, Larry
11075 N. Fuego Dr.
Citrus Springs, FL 34442

D
Dixon, Ed
321 Mt. Airy Street
Cantonment, FL 32533

D
Foster, Natheory Jr.
4975 Toproyal Lane
Jacksonville, FL 32277

I trust this information and the enclosed form are satisfactory to the required information
you seek.

Sincerely,


Orville Jenkins, Jr.
District Superintendent