## **2003 NOT-FOR-PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 735787

1. Entity Name



## **FILED** Feb 18, 2003 8:00 am Secretary of State 02-18-2003 90097 007 \*\*\*\*61.25

FORT CA	ROLINE UNITED METHODIST	CHURCH, INC.							
JACKSONVILLE FL 32277-2974		Mailing Address 8510 FT CAROLINE ROAD JACKSONVILLE FL 32277-2974 US			(100)	NIJAS AUKII KARRI KAUK KRALI AKALI	DIDIN DUDIN ANDU AL	ON BOOK CON	
2. Principal Place of Business 3		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number <b>59-1375581</b> Applied For				
Zip	Country	Zip	Coun	itry	5. Certificate of S	Status Desired	\$8.75 Ad		1
	6. Name and Address of Current R	egistered Agent	T		7. Name and Ad	dress of New Registere	•	<del>50</del>	┥
WHITE, HOUSTON 11026 HARBOR CAY CT. JACKSONVILLE FL 32225				13888 City To C	PIPE PROPERTY OF THE PROPERTY				1
8. The above the obligation of	e named entity submits this statement for titions of registered agent  Signature, wheel or printed name of registered agent and	John	<b></b> .	<u> </u>	ered agent, or both, in	the State of Florida. I a	7/03	, and accept	
	FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
10.	OFFICERS AND DIRE	CTORS	11.		ADDITIONS/CHANG	SES TO OFFICERS AND	DIRECTORS IN	√ 10	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STIRRETT, BILL 10147 LAKEVIEW RD W JACKSONVILLE FL 32225	☐ Delete	TITLE NAME STREET CITY-ST	ADDRESS T-ZIP			Change	☐ Addition	(20/01) 250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILSON, HAROLD 1594 HOLLY OAKS LAKE RD W JACKSONVILLE-FL 32225	☐ Delete	TITLE NAME STREET	ADDRESS I-ZIP			Change	Addition	CRO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WHITE, HOUSTON 11026 HARBOR CAY CT JACKSONVILLE FL 32225	<b>X</b> Delete	TITLE NAME STREET A CITY-ST	ADDRESS 138	obs John 88 Pleasant acksonvill	M. Valley Dr. le, FL 32	□ Change ∂∂S	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SPOCK, BUCK 1486 GATELY RD JACKSONVILLE FL 32225	<b>∑</b> Delete	TITLE NAME STREET A CITY-ST	ADDRESS 1120	110 Ed	ger Circle	□ Change	Addition	
TITLE NAME Street Address City-St-Zip	TR MATCHETT, STEPHEN 3950 HILL TERRACE DR JACKSONVILLE FL 32246	<b>⊠</b> Delete	TITLE NAME STREET A CITY-ST	D Gre ADDRESS 846	en, James 00 H. Cari		☐ Change	Addition	
	Tr Rouse, Millard 3475 Sandburg Rd Jacksonville Fl 32277	∑ Delete	TITLE NAME STREET A CITY-ST			ine illes Dr. le.FL 30		Addition	

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: X

2/7/03 904-632-0200