2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768247

Title:

Name:

Address:

City-St-Zip:

FILED Feb 11, 2009 Secretary of State

Entity Name: DOWNTOWN ECUMENICAL SERVICES COUNCIL, INC.

New Principal Place of Business: Current Principal Place of Business: 215 OCEAN STREET JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** 215 OCEAN STREET JACKSONVILLE, FL 32202 FEI Number: 59-2437003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLBROOK-COLD, KATHLEEN F ONE INDEPENDENT DRIVE STE 2301 JACKSONVILLE, FL 32202 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BERREY, ROSALIND Name: Name: PO BOX 40006 Address: Address: City-St-Zip: JACKSONVILLE, FL 32203 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition WRIGHT, GILBERT Name: ABERNATHY, ALISON Name: Address: 1265 QUEENS ISLAND CT. Address: 2744 SOUTHWOOD LANE. City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32207 Title: () Delete Title: (X) Change () Addition MATTHEWS, JEFF MATTHEWS, JEFF Name: Name: 41 E. DUVAL STREET 41 E. DUVAL STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202 Title: () Delete Title: D (X) Change () Addition Name: TUTTLE, DAVE Name: TUTTLE, DAVE Address: 118 E. MONROE ST. Address: 1016 OAK STREET City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32204 Title: () Delete Title: (X) Change () Addition TURNETT, MITCH BECKHAM, ROBERT Name: Name: 4380 WORTH DR. E. 50 N. LAURA STREET, STE 3900 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32202

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MARY R. SPUHLER, EXECUTIVE DIRECTOR ED 02/11/2009

() Delete

HEDRICK, CHARLES V

1337 RIVER OAKS RD

JACKSONVILLE, FL 32205

(X) Change () Addition

HEDRICK, CHARLES V

1337 RIVER OAKS RD

JACKSONVILLE, FL 32205