

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768247

FILED
Jan 05, 2010
Secretary of State

Entity Name: DOWNTOWN ECUMENICAL SERVICES COUNCIL, INC.

Current Principal Place of Business:

215 OCEAN STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

215 OCEAN STREET
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-2437003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLBROOK-COLD, KATHLEEN F
ONE INDEPENDENT DRIVE
STE 2301
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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:

Title: TD
Name: BERREY, ROSALIND
Address: PO BOX 40006
City-St-Zip: JACKSONVILLE, FL 32203

Title: SD
Name: ABERNATHY, ALISON
Address: 2744 SOUTHWOOD LANE.
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: MATTHEWS, JEFF
Address: 41 E. DUVAL STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: PD
Name: TUTTLE, DAVE
Address: 1016 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: KIRILL, WILLIAM
Address: 4339 VENETIA BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: HEDRICK, CHARLES V
Address: 1337 RIVER OAKS RD
City-St-Zip: JACKSONVILLE, FL 32205

I hereby 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 all other like empowered.

SIGNATURE: MARY R. SPUHLER

EXEC

01/05/2010

Electronic Signature of Signing Officer or Director

Date