

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 05, 2008 8:00 am
Secretary of State

04-23-2008 90039 012 ****61.25

DOCUMENT # N50876 1. Entity Name RIVERSIDE AVENUE CHRISTIAN CHURCH (DISCIPLES OF CHRIST), INC.																													
Principal Place of Business 2841 RIVERSIDE AVENUE JACKSONVILLE FL 32205			Mailing Address 2841 RIVERSIDE AVENUE JACKSONVILLE FL 32205																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State		City & State		4. FEI Number 59-0917280																									
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent HULL, RICHARD J II 2841 RIVERSIDE AVE JACKSONVILLE FL 32205				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																									
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. I am familiar with, and accept the obligations of registered agent.				SIGNATURE <i>Richard J. Hull</i> 4/10/08 Signature, typed or printed name of registered agent and the fee applicable. (NOTE: Registered Agent signature is required when registering.)																									
FILE NOW: FEE IS \$61.25 Due By: May 1, 2008		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 DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">CPD</td> <td style="width: 10%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>RICHARDSON, DAN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2841 RIVERSIDE AVENUE</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>JACKSONVILLE FL 32205</td> <td></td> </tr> </table>				TITLE	CPD	☐ Delete	NAME	RICHARDSON, DAN		STREET ADDRESS	2841 RIVERSIDE AVENUE		CITY- ST- ZIP	JACKSONVILLE FL 32205		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">VD</td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>MARGARET DEES</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2841 RIVERSIDE AVENUE</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>JACKSONVILLE FL 32205</td> <td></td> </tr> </table>		TITLE	VD	☐ Change ☐ Addition	NAME	MARGARET DEES		STREET ADDRESS	2841 RIVERSIDE AVENUE		CITY- ST- ZIP	JACKSONVILLE FL 32205	
TITLE	CPD	☐ Delete																											
NAME	RICHARDSON, DAN																												
STREET ADDRESS	2841 RIVERSIDE AVENUE																												
CITY- ST- ZIP	JACKSONVILLE FL 32205																												
TITLE	VD	☐ Change ☐ Addition																											
NAME	MARGARET DEES																												
STREET ADDRESS	2841 RIVERSIDE AVENUE																												
CITY- ST- ZIP	JACKSONVILLE FL 32205																												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">VD</td> <td style="width: 10%; text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>EDDIE, SHEREE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2841 RIVERSIDE AVE</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>JACKSONVILLE FL 32205</td> <td></td> </tr> </table>				TITLE	VD	☐ Change ☒ Addition	NAME	EDDIE, SHEREE		STREET ADDRESS	2841 RIVERSIDE AVE		CITY- ST- ZIP	JACKSONVILLE FL 32205		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">TD</td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>UMBERGER, GREG</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2841 RIVERSIDE AVE.</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>JACKSONVILLE FL 32205</td> <td></td> </tr> </table>		TITLE	TD	☐ Change ☐ Addition	NAME	UMBERGER, GREG		STREET ADDRESS	2841 RIVERSIDE AVE.		CITY- ST- ZIP	JACKSONVILLE FL 32205	
TITLE	VD	☐ Change ☒ Addition																											
NAME	EDDIE, SHEREE																												
STREET ADDRESS	2841 RIVERSIDE AVE																												
CITY- ST- ZIP	JACKSONVILLE FL 32205																												
TITLE	TD	☐ Change ☐ Addition																											
NAME	UMBERGER, GREG																												
STREET ADDRESS	2841 RIVERSIDE AVE.																												
CITY- ST- ZIP	JACKSONVILLE FL 32205																												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">SD</td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>MCCLURE, CORINNE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2841 RIVERSIDE AVE.</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>JACKSONVILLE FL 32205</td> <td></td> </tr> </table>				TITLE	SD	☐ Change ☐ Addition	NAME	MCCLURE, CORINNE		STREET ADDRESS	2841 RIVERSIDE AVE.		CITY- ST- ZIP	JACKSONVILLE FL 32205		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">TD</td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	TD	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
TITLE	SD	☐ Change ☐ Addition																											
NAME	MCCLURE, CORINNE																												
STREET ADDRESS	2841 RIVERSIDE AVE.																												
CITY- ST- ZIP	JACKSONVILLE FL 32205																												
TITLE	TD	☐ Change ☐ Addition																											
NAME																													
STREET ADDRESS																													
CITY- ST- ZIP																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">TD</td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>				TITLE	TD	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY- ST- ZIP			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">TD</td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	TD	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
TITLE	TD	☐ Change ☐ Addition																											
NAME																													
STREET ADDRESS																													
CITY- ST- ZIP																													
TITLE	TD	☐ Change ☐ Addition																											
NAME																													
STREET ADDRESS																													
CITY- ST- ZIP																													
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Richard J. Hull</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													