## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 707106** 

Entity Name: SECOND CHURCH OF CHRIST, SCIENTIST, JACKSONVILLE,

**FLORIDA** 

**FILED** Jan 28, 2020 **Secretary of State** 0936602911CC

### **Current Principal Place of Business:**

3255 RIVERSIDE AVE. JACKSONVILLE, FL 32205

## **Current Mailing Address:**

3255 RIVERSIDE AVE. JACKSONVILLE, FL 32205

FEI Number: 59-6045894 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JACKSONVILLE FL 32205

NEW, LAUREL A 3255 RIVERSIDE AVE JACKSONVILLE, FL 32205 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: LAUREL A. NEW 01/28/2020

> Electronic Signature of Registered Agent Date

# Officer/Director Detail:

City-State-Zip:

Title VC Title **SECRETARY** Name HAMILTON, CAROL Name GREEN, KATHRYN Address 3255 RIVERSIDE AVE Address 3255 RIVERSIDE AVE City-State-Zip: JACKSONVILLE FL 32205 City-State-Zip: JACKSONVILLE FL 32205

Title **DIRECTOR** Title **TREASURER** 

Name NEW, LAUREL Name STEWART, ANNIE Address 3255 RIVERSIDE AVE Address 3255 RIVERSIDE AVE City-State-Zip: JACKSONVILLE FL 32205

Title **DIRECTOR** Title DIRECTOR, CHAIRMAN

Name PAULK, STEPHEN Name PAULK, NIKKI

Address 3255 RIVERSIDE AVENUE 3255 RIVERSIDE AVE Address City-State-Zip: JACKSONVILLE FL 32205 City-State-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.

01/28/2020 SIGNATURE: LAUREL NEW **TREASURER**