## 2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 768247** 

Entity Name: DOWNTOWN ECUMENICAL SERVICES COUNCIL, INC.

**FILED** May 05, 2017 **Secretary of State** CC6881987317

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

215 NORTH OCEAN STREET JACKSONVILLE, FL 32202

# **Current Mailing Address:**

215 NORTH OCEAN STREET JACKSONVILLE, FL 32202 US

FEI Number: 59-2437003 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MEUX, JOSEPH CLAY JR. 1301 RIVERPLACE BOULEVARD **SUITE 1500** JACKSONVILLE, FL 32207 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: JOSEPH CLAY MEUX, JR.

05/05/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	DIRECTOR	Title	DIRECTOR
Name	RUTLAND, ALFRED	Name	HEDRICK, CHARLES V
Address	8604 ETHANS GLEN TERRACE	Address	1337 RIVER OAKS RD
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32207
Title	DIRECTOR	Title	SECRETARY, DIRECTOR
Name	REDINGTON, LANI B	Name	NOVAK, SUSAN
Address	1539 MARCO PLACE	Address	215 NORTH OCEAN STREET
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32202
Title	DIRECTOR	Title	TREASURER, DIRECTOR
Name	BENNETT-HILL, THERESA	Name	CARRAHER, TRISTA
Address	P.O. BOX 47621	Address	215 NORTH OCEAN STREET
City-State-Zip:	JACKSONVILLE FL 32247	City-State-Zip:	JACKSONVILLE FL 32202
Title	VP, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	BENAVIDES, ALEX	Name	MEUX, JOSEPH CLAY JR.
Address	5457 BLUE PACIFIC DRIVE	Address	1301 RIVERPLACE BOULEVARD, SUITE 1500
City-State-Zip:	JACKSONVILLE FL 32257	Citv-State-Zip:	JACKSONVILLE FL 32207

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: JOSEPH CLAY MEUX, JR.

**PRESIDENT** 

City-State-Zip: JACKSONVILLE FL 32207

05/05/2017