

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001126

Entity Name: MT. MORIAH UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**3919 ST AUGUSTINE ROAD
JACKSONVILLE, FL 32207**Current Mailing Address:**3919 ST AUGUSTINE ROAD
JACKSONVILLE, FL 32207**FEI Number: 33-1073579****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KINSEY, EVELYN
3919 ST AUGUSTINE ROAD
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name GREEN, BERNARD
Address 3919 ST AUGUSTINE ROAD
City-State-Zip: JACKSONVILLE FL 32207

Title VD
Name CHANDLER, EARL
Address 3919 ST AUGUSTINE RD
City-State-Zip: JACKSONVILLE FL 32207

Title SD
Name KINSEY, EVELYN
Address 3919 ST AUGUSTINE RD
City-State-Zip: JACKSONVILLE FL 32207

Title TD
Name RIGBY-BROOKS, PEARL
Address 3919 ST AUGUSTINE RD
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name JONES, JOSEPHINE
Address 3919 ST AUGUSTINE RD
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name WANTON, ENOCH R.
Address 3919 ST AUGUSTINE RD
City-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: EVELYN KINSEY**SD****04/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date