#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32013

Entity Name: FAITH UNITED METHODIST CHURCH OF JACKSONVILLE, INC.

FILED
Jan 25, 2016
Secretary of State
CC1566931211

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

4000 SPRING PARK RD JACKSONVILLE, FL 32207

## **Current Mailing Address:**

4000 SPRING PARK RD JACKSONVILLE. FL 32207 US

FEI Number: 59-0696290 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SHUTTERLY, RICHARD L 2539 LOWELL AVE JACKSONVILLE, FL 32254 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: RICHARD L SHUTTERLY 01/25/2016

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

 Title
 CO-TRUSTEE
 Title
 CO-TRUSTEE

 Name
 LONG, JAMES A
 Name
 SABOL, JOAN

Address 12301 KERNAN FOREST BLVD Address 5016 RIVER POINT RD

505

City-State-Zip: JACKSONVILLE FL 32225

Title CO-TRUSTEE

Name WESTBROOK, MAXINE

Name BEVILLE, MICHAEL

Address 2511 PROVOST RD E

Address 15503 BREAM RD

City-State-Zip: JACKSONVILLE FL 32226

Title CO-TRUSTEE

Name REED, SARAH

Name BRAVO, NANCY Address 7743 HILSDALE HARBOR CT

Address 7147 OLD KINGS RD
APT 24 City-State-Zip: JACKSONVILLE FL 32216

City-State-Zip: JACKSONVILLE FL 32217
Title TRUSTEE

Title CO-TRUSTEE Name SHUTTERLY, RICHARD L

Name SOTO, RAUL Address 2539 LOWELL AVE

Address 146 STAPLEHURST City-State-Zip: JACKSONVILLE FL 32254

City-State-Zip: ST JOHNS FL 32259

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: JAMES A. LONG TRUSTEE 01/25/2016