

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32013

**Entity Name:** FAITH UNITED METHODIST CHURCH OF JACKSONVILLE, INC.**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:**PENNEY, EVELYN  
2149 HUNTSFORD RD  
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:** EVELYN PENNEY

03/23/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CO-TRUSTEE  
Name LONG, JAMES A  
Address 12301 KERNAN FOREST BLVD  
APT 505  
City-State-Zip: JACKSONVILLE FL 32225

Title CO-TRUSTEE  
Name BEVILLE, MICHAEL  
Address 2511 PROVOST RD E  
City-State-Zip: JACKSONVILLE FL 32216

Title CO-TRUSTEE  
Name DIAZ, RAFAEL  
Address 8737 BAYMEADOWS RD  
City-State-Zip: JACKSONVILLE FL 32256

Title TRUSTEE  
Name PENNEY, EVELYN  
Address 2149 HUNTSFORD RD  
City-State-Zip: JACKSONVILLE FL 32207

Title CO-TRUSTEE  
Name SABOL, JOAN  
Address 5016 RIVER POINT RD  
City-State-Zip: JACKSONVILLE FL 32207

Title CO-TRUSTEE  
Name SHUTTERLY, RICHARD L  
Address 2539 LOWELL AVE  
City-State-Zip: JACKSONVILLE FL 32254

Title CO-TRUSTEE  
Name DANIEL, SANDY  
Address 3395 PICKWICK DR S  
City-State-Zip: JACKSONVILLE FL 32257

*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 PENNEY

TRUSTEE CHAIRPERSON 03/23/2017

Electronic Signature of Signing Officer/Director Detail

Date