FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DCUMENT # **703079**

dvenant presbyterian Church, inc.

Country

LER, HELEN RECAYTE LER CHOP CH. PAG.

ipal Place of Business

NORMANDY BLVD SONVILLE FL 32221

incipal Place of Business

3 PINNACLE DRIVE **KSONVILLE FL 32221**

ite, Apt. #, etc.

y & State

Mailing Address

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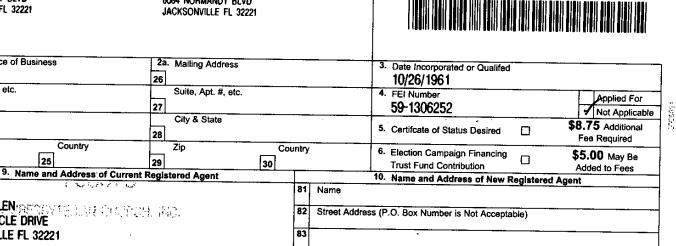
8084 NORMANDY BLVD JACKSONVILLE FL 32221

FILED Feb 05, 1999 8:00am **Secretary of State**

02-05-1999 90021 042 ****61.25

85

Zip Code



insuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered fice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered and accept the obligations of, Section 617.0503, Florida Statutes.

TURE					
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature		DATE	
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES 1	O OFFICERS AND DIRECTO	RS IN 12
	D DELE	TE 1.1 TITLE	10/25/1981	☐ Change	Addition
	MILLER, HELEN	1.2 NAME	1		—
(DORESS	THE THE PARTY OF T	1.3 STREET ADDRESS	57.75%,057		
ŽIP.	JACKSONVILLE FL 32221	1.4 CITY-ST-ZIP			
	VD DELE			☐ Change	☐ Addition
:	DONOVAN, BOB	2.2 NAME			
DORESS		2.3 STREET ADDRESS			
ZIP	JACKSONVILLE FL 32221				
	D' DELE	2. 4 CITY- ST- ZIP TE 3.1 TITLE		<u> </u>	
198.4		di Title	•	☐ Change	☐ Addition
DORESS	MAYATOM A CANADA A CA	3.2 NAME			
	JACKSONVILLE FL	3.3 STREET ADDRESS			
F) (2)		3.4. CITY-ST-ZIP			_
	T DELE	TE 4.1 TITLE		Change	☐ Addition
	ACREE, CRAIG	4. 2 NAME	\$1\$ to 0 (\$5,70 x 25)	E. B. S. C. et albeit der annen aus	
- 1	0000 PEDDLE SI.				
P	JACKSONVILLE FL 32221	4.4 CITY-ST-ZIP	上		
- 1	☐ DELE	FE 5.1 TITLE		☐ Change	Addition
ŀ		5.2 NAME			
XDRESS	.n	5.3 STREET ADDRESS			
P	<u>)</u>	5.4 CITY-ST-ZIP	\$\$ (\$P 96)		
- 1	DELET	E 6.1 TITLE		☐ Change	Addition
	7768 PANACLE NA.	6.2 NAME	-0.05.752		☐ AddidOn
UNESS	ACMOGRAPH CONTROL Property	6.3 STREET ADDRESS		•	
. [VD	6.4 CITY-ST-ZIP			
rehy ce	ertify that the information cumplied with this files do	4.5 61.1 61.2			

pplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information lemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in er or director of the corporation or k 12 or Block 13 if changed, or of