

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725481

1. Entity Name

HENDRICKS AVENUE BAPTIST CHURCH

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90104 050 ****61.25

Principal Place of Business

4001 HENDRICKS AVENUE
JACKSONVILLE FL 32207

Mailing Address

4001 HENDRICKS AVENUE
JACKSONVILLE FL 32207-6321

2. Principal Place of Business

4001 HENDRICKS AVE

Suite, Apt. #, etc.

3. Mailing Address

4001 HENDRICKS AVE

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

JACKSONVILLE FL 3

City & State

JACKSONVILLE FL

4. FEI Number

59-0711173

Applied For

Not Applicable

Zip

32225

Country

USA

Zip

32225

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SNELL, JACK A
4001 HENDRICKS AVENUE
JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

JACK A. SNELL *Jack A. Snell* PRESIDENT

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/14/00
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE D
NAME FELTON, CARLE A
STREET ADDRESS 3208 BEAUCLERC ROAD
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE D
NAME O'NEAL, DOUGLAS
STREET ADDRESS 25205 MARSH LANDING PKWY
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 ☐ Delete

TITLE D
NAME SENTERFITT, ELIZABETH A
STREET ADDRESS 822 ACAPULCO RD.
CITY-ST-ZIP JACKSONVILLE FL 32216 ☐ Delete

TITLE P
NAME SNELL, JACK A.
STREET ADDRESS 4001 HENDRICKS AVE.
CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ Delete

TITLE S
NAME FAUSS, CAROLE C.
STREET ADDRESS 2470 CASTELLON DR N
CITY-ST-ZIP JACKSONVILLE FL 32217 ☐ Delete

TITLE T
NAME MITCHELL, JOHN A III
STREET ADDRESS 10110 GOLF CLUB DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32233 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME GENTRY, W. C.
STREET ADDRESS 1224 REDBOD LA
CITY-ST-ZIP JACKSONVILLE FL 32207 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

John A. Mitchell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/00

904-396-7745
Daytime Phone #

CR2E037 (9/99)