## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 735787** 

FILED Jan 13, 2009 Secretary of State

Entity Name: FORT CAROLINE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

8510 FT CAROLINE ROAD JACKSONVILLE, FL 322772974 US

Current Mailing Address: New Mailing Address:

8510 FT CAROLINE ROAD JACKSONVILLE, FL 322772974 US

FEI Number: 59-1375581 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDERSON, MORGAN 7235 TRAILS END JACKSONVILLE, FL 32277 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:

Fladeric Construct David and American

## Electronic Signature of Registered Agent

## Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 ( ) Delete
 Title:
 C
 (X) Change ( ) Addition

 Name:
 DAVIS, DAVID
 Name:
 DAVIS, DAVID

 Address:
 11425 MCCORMICK RD #290
 Address:
 11425 MCCORMICK RD #290

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

Address: 4549 BAY HARBOUR DR Address: 4549 BAY HARBOUR DR
City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 CRICK, JOHN
 Name:
 BYWATERS, CARLTON

 Address:
 1528 CELLAR CIR
 Address:
 11242 ISLAND CLUB LN

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HALL, MIKE
 Name:

 Address:
 3652 ROSEMARY ST
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:

 Name:
 BURCROFF, BILL
 Name:
 KELLER, PHILLIP

 Address:
 2676 HOWDEN CT
 Address:
 14032 BROKEN BOW DR S

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: T ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 THOMPSON, ROBERT
 Name:
 MOORE, ANITA

 Address:
 817 HAGLER DR
 Address:
 3930 YARBOROUGH DR

 City-St-Zip:
 NEPTUNE BEACH, FL 32266
 City-St-Zip:
 JACKSONVILLE, FL 32277

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID DAVIS C 01/13/2009