2000 UNIFORM BUSINESS REPORT (UBR) **FILED DOCUMENT # 743134** 1. Entity Name FLORIDA CHRISTIAN MANOR, INC. 03-06-2000 90045 017 ****61.25 Principal Place of Business Mailing Address 3505 CORBY STREET 3505 CORBY STREET JACKSONVILLE FL 32205-5920 JACKSONVILLE FL 32205 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1862607 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name

Mar 06, 2000 8:00 am Secretary of State



THE PRENTICE-HALL CORPORATION SYSTEM INC.			Street A	Street Address (P.O. Box Number is Not Acceptable)			
1201 HAYS	SIREET				•		
SUITE 105 TALLAHASSEE FL 32301			City	City FL Zip Code			-
3. The above	named entity submits this statement fo	the purpose of changing its regi	stered office or	registered agent, or both	, in the state of Florida.		
	,						
SIGNATURE							
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Reg	istered Agent signati	ure required when reinstating)	DATE		
	4%				······································		
	FILE NOW: 9. Election Campaign F		· -	\$5.00 May Be Make Check Payable to			
	FEE*1S \$61.25 Trust Fund Contri		٦. 🗀	Added to Fees Department of State			
10.	OFFICERS AND DIF	RECTORS	11.		NGES TO OFFICERS AND DIR		
FITLE	SD	⊠ Delete	TITLE	D		Change	X Addition
NAME	BRITTON, TAMER	NAME	ALEXANDER, MARK G.				
STREET ADDRESS	P.O. BOX 12163 N/A			50 N. LAURA STREET SUITE 3900 JACKSONVILLE, FL 32202			
CITY-ST-ZIP	JACKSONVILLE FL.		CITY-ST-ZIP	JACKSONVIT-1	LE, FL 32202		
TITLE	D	☑ Delete	TITLE	D		Change	Addition
NAME.	ETHRIDGE, JAMES B.		NAME	CORAM, RICI			
STREET ADDRESS	304 WILSONS MILLS ROAD			142 30TH A			I
CITY-ST-ZIP	SMITHFIELD NC	·	CITY-ST-ZIP	JACKSONVILI	LE BEACH, FL 3	2250	
TITLE	TD	☑ Delete	TITLE	TD		Change	Addition
NAME	HILLERY, JAMES		NAME	DOWNS, GENI			
STREET ADDRESS	920 PLATO AVENUE			6177 6TH AVE N			
CITY-ST-ZIP	ORLANDO FL 32809	CITY-ST-ZIP	ST. PETERSBURG, FL 33710				
TITLE	D	☐ Delete	TITLE	SD		☆ Change	Addition
NAME	MOORE, JOAN	•	NAME	MOORE, JOAN			
STREET ADDRESS	1718 OSCEOLA STREET		STREET ADDRESS	1718 OSCEO			
CITY-ST-ZIP	JACKSONVILLE FL 32204		CITY-ST-ZIP	JACKSONVILI	LE, FL 32204		
TITLE	PD	Delete	TITLE	PD		Change	Addition
NAME	TUMBLIN, RICHARD	A	NAME	BURTON, JAN			
STREET ADDRESS	4202 BARBARA DRIVE		STREET ADDRESS	2726 BURNS			
CITY-ST-ZIP	KNOXVILLE TN		CITY-ST-ZIP		GARDENS, FL 3	3410	
TITLE	VD	Delete	TITLE	VD		☐ Change	🔼 Addition
NAME	ENTWISTLE, DAN		NAME	YOUNG, WILI			1
STREET ADDRESS	4019 LAKE MIRAGE BLVD.		STREET ADDRESS	44 OAKVIEW			
CITY-ST-ZIP	ORLANDO FL 32817		CITY-ST-ZIP	OKMOND BEAG	CH, FL 32176		
12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for the true and accurate and that my s	exemption sta	ted in Section 119.07(3)(i) ave the same legal effect	, Florida Statutes. I further certi as if made under oath; that I ar	fy that the in	formation or director