

2001 UNIFORM BUSINESS REPORT (UBR)

2/2

FILED
Mar 19, 2001 8:00 am
Secretary of State

02-21-2001 90057 011 ****61.25

DOCUMENT # 747292

1. Entity Name

THE FIRST ALLIANCE CHURCH OF THE CHRISTIAN AND M

Principal Place of Business

1132 HAMILTON STREET
 JACKSONVILLE FL 32205

Mailing Address

1132 HAMILTON STREET
 JACKSONVILLE FL 32205

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3155833

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GRAVELLE, JR J
 1800 BLANDING BLVD
 #35
 JACKSONVILLE FL 32205

7. Name and Address of New Registered Agent

Name **RICHARD H. WARREN**

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

1127 DANCY ST.

City **JACKSONVILLE**

FL

Zip Code **32205**

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

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

RICHARD H. WARREN V/D

(NOTE: Registered Agent signature required when reinstating)

02-11-01

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	TD	<input checked="" type="checkbox"/> Delete
NAME	WARREN, DIANE	
STREET ADDRESS	1127 DANCY STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32205	
TITLE	CD	<input type="checkbox"/> Delete
NAME	WARREN, RICK <i>Richard</i>	
STREET ADDRESS	1127 DANCY ST	
CITY-ST-ZIP	JACKSONVILLE FL 32205	
TITLE	SD	<input type="checkbox"/> Delete
NAME	STRUNK, MARIE	
STREET ADDRESS	1154 HAMILTON ST	
CITY-ST-ZIP	JACKSONVILLE FL 32205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEPHEN F. FARNHAM	
STREET ADDRESS	1120 DE PAUL DR	
CITY-ST-ZIP	JACKSONVILLE FL 32218	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

RICHARD H. WARREN V/D

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-11-01

Date

904 3876296

Daytime Phone #

CR2E037 (10/00)