## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 766360**

## FORT CAROLINE CHAPTER #3545 OF AMERICAN ASSOCIAT

Country

6. Name and Address of Current Registered Agent

\* / · OFFICERS AND DIRECTORS

Tomlinson

C/O FT CAROLINE METH CHURCH 6510 FT CAROLINE RD.

MAC INNES, AUDREY E 4828 BEACON DR WEST 112 CIMMARON APTS

JACKSONVILLE FL 32225

FILE NOW:

FEE IS \$61.25

MACINNES, AUDREY E

**4828 BEACON DR WEST** 

Jacksonville FL 32225

1701 ASHMORE GREEN DR.

GATEWOOD, MARJORIE A

JACKSONVILLE FL 32277

PENTACOST, SYLVIA

JACKSONVILLE FL

6011 PEELER RD S

HARKEY, ELIZABETH

8331 MANA VISTA ST

JACKSONVILLE FL

MOSON, MADLEN

Jacksonville fl 32277

6724 HEIDE RD

Principal Place of Business

Mailing Address

8510 FT. CAROLINE RD. JACKSONVILLE FL 32277-2974

9. Election Campaign Financing

11.

TITLE

NAME

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

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Trust Fund Contribution.

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Country

Name

JACKSONVILLE FL 32270

2.

Zip

SIGNATURE

10.

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STREET ADDRESS

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CITY-ST-7IP

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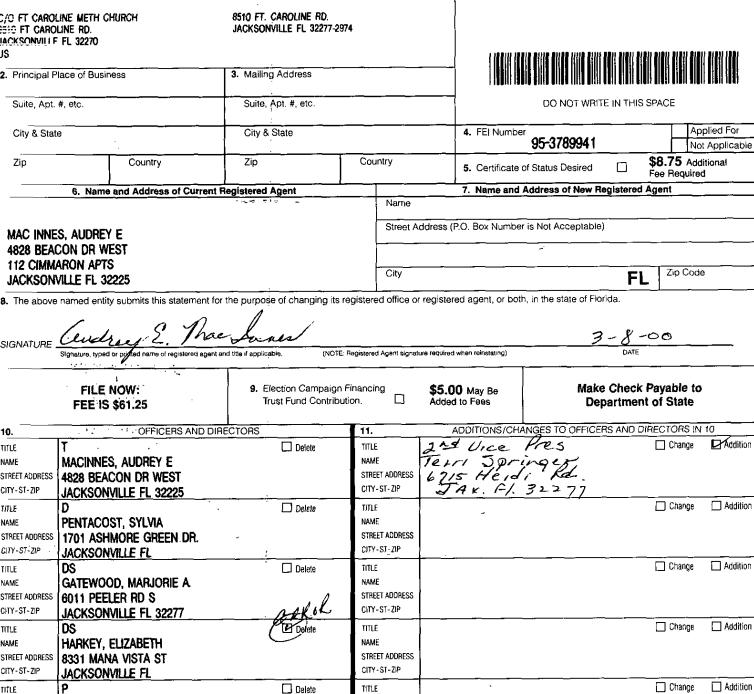
CITY-ST-ZIP

Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

Zip

FILED Mar 10, 2000 8:00 am Secretary of State

03-10-2000 90030 015 \*\*\*\*61.25



STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

☐ Addition

(66/6)