

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766921

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** RIVERSIDE PARK UNITED METHODIST CHURCH FOUNDATION, INC.

**Current Principal Place of Business:**

819 PARK ST.  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

819 PARK ST.  
JACKSONVILLE, FL 32204

**New Mailing Address:**

**FEI Number:** 59-2908297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIDDLETON, GORDON JR  
819 PARK ST  
JACKSONVILLE, FL 32204 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: O  
Name: MIDDLETON, GORDON JR  
Address: 4611 MONUMENT POINT RD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: O  
Name: PICKREN, CHARLES  
Address: 12899 CANNINGTON COVE TERRACE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: O  
Name: HODGES, BILL  
Address: 1315 WINDSOR PLACE  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: O  
Name: MATHEWS, MARK  
Address: 3034 BEAUCLERC OAKS DRIVE S  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: O  
Name: FRANCA BANDIERO, DANIEL  
Address: 4163 SHIRLEY AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

**SIGNATURE:** GORDON MIDDLETON JR

O

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date