

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000000844

1. Entity Name

FISHERS OF MEN OUTREACH MINISTRIES, INC.

Principal Place of Business

1130 GOLFAIR BLVD
JACKSONVILLE FL 32209

Mailing Address

1130 GOLFAIR BLVD
JACKSONVILLE FL 32209

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

59-3628745

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SINNER, CHRYSANDRA F
1130 GOLFAIR BLVD
JACKSONVILLE FL 32209

7. Name and Address of New Registered Agent

Name
Chrysandra E. Skinner

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

1130 Golfair Blvd.

City
Jacksonville

FL

Zip Code
32209

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.

(NOTE: Registered Agent signature required when reinstating)

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 P
NAME SKINNER, CHRYSANDRA
STREET ADDRESS 1130 GOLFAIR BLVD
CITY-ST-ZIP JACKSONVILLE FL 32209 ☒ Delete

TITLE S
NAME SKINNER, JOHNNY
STREET ADDRESS 1130 GOLFAIR BLVD
CITY-ST-ZIP JACKSONVILLE FL 32209 ☒ Delete

TITLE V
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/C
NAME Skinner Chrysandra
STREET ADDRESS 1130 Golfair Blvd
CITY-ST-ZIP Jacksonville, FL 32209 ☒ Change ☐ Addition

TITLE S/O
NAME Sherry Bouie
STREET ADDRESS 226 Sahara Ct
CITY-ST-ZIP Jacksonville, FL 32216 ☐ Change ☒ Addition

TITLE V/O
NAME Johnny Skinner
STREET ADDRESS 1130 Golfair Blvd
CITY-ST-ZIP Jacksonville, FL 32209 ☒ Change ☒ Addition

TITLE D
NAME Charles Bouie
STREET ADDRESS 226 Sahara Ct
CITY-ST-ZIP Jacksonville, FL 32216 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: Chrysandra E. Skinner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

904-791-6046

3/

FILED

Mar 27, 2001 8:00 am

Secretary of State

03-05-2001 90290 006 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)