

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000001515

1. Entity Name

THE GARDENS OF MOUNT CARMEL, INC.

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90161 002 ****61.25

Principal Place of Business

Mailing Address

5846 MT. CARMEL TERRACE
JACKSONVILLE FL 32216

5846 MT. CARMEL TERRACE
JACKSONVILLE FL 32216

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 **59-3162187**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCDONALD, SUSAN C ESQ.
1301 RIVERPALCE BLVD.
SUITE 1500
JACKSONVILLE FL 32207

Name

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

City

FL

Zip Code

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D COLEMAN, JACK
1436 SWAN LANE
JACKSONVILLE FL 32207 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Anne Storch
2415 Costa Verde Blvd. #103
Jacksonville Beach, FL 32250 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D BENWICK, BRIAN
11628 LOIS CROSS DRIVE
JACKSONVILLE FL 32258 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Honorable Peter Fryefield
7942 Hunters Grove Rd.
Jacksonville, FL 32258 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D CARTER, DEBBI
803 WOOD HILL DRIVE
JACKSONVILLE FL 32256 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
David Thomy
3655 S. Cathedral Oaks
Jacksonville, FL 32217 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D LEWIS, BEN
11550 HIDDEN HARBOR
JACKSONVILLE FL 32223 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D LEVIN, GERALD
2132 LA VACA ROAD
JACKSONVILLE FL 32217 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D AXELBERG, LOUISE
3853 OLDFIELD TRAIL
JACKSONVILLE FL 32223 ☐ Delete

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: *Brian Benwick*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/02 904.733.6696
Date Daytime Phone #

CR2E037 (9/01)