

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90206 014 \*\*\*\*61.25

**DOCUMENT # N01000000651**

1. Entity Name

**SHALOM CENTER MINISTRY, INC.**



Principal Place of Business

**521 WEST ASHLEY STREET  
JACKSONVILLE FL 32202**

Mailing Address

**8072 HONEYSUCKLE LANE  
JACKSONVILLE FL 32244**

2. Principal Place of Business

**521 West Ashley St.**

3. Mailing Address

**8072 Honeysuckle Ln**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**JACKSONVILLE**

**JACKSONVILLE**

City & State

City & State

**Florida**

**Florida**

Zip

Country

Zip

Country

**32202**

**Duval**

**32244**

**Duval**



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3702651**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MERVL, JACQUES REV.  
8072 HONEYSUCKLE LANE  
JACKSONVILLE FL 32244**

7. Name and Address of New Registered Agent

Name **ROU JACQUES MERVL**  
Street Address (P.O. Box Number is Not Acceptable)  
**8072 Honeysuckle Ln**  
City **JACKSONVILLE FL** Zip Code **32244**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**JACQUES MERVL President 04-28-03**

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	MERVL, JACQUES	
STREET ADDRESS	8072 HONEYSUCKLE LANE	
CITY-ST-ZIP	JACKSONVILLE FL 32244	
TITLE	SD	<input type="checkbox"/> Delete
NAME	DICKERSON, FLOURY	
STREET ADDRESS	2226 GARHERD ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MERVL, EVELYN	
STREET ADDRESS	635 LEE ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32226	
TITLE	V	<input type="checkbox"/> Delete
NAME	AUGUSTINE, MICHAEL	
STREET ADDRESS	1900 SAST STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32226	
TITLE	D	<input type="checkbox"/> Delete
NAME	JEAN, VICTOR	
STREET ADDRESS	7823 ELVIA DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32211	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MERVL JACQUES	
STREET ADDRESS	8072 Honeysuckle Ln	
CITY-ST-ZIP	JACKSONVILLE FL 32244	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dickerson Floury	
STREET ADDRESS	2226 Garherd Road	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MERVL Evelyn	
STREET ADDRESS	635 Lee Rd	
CITY-ST-ZIP	JACKSONVILLE FL 32226	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Augustine Michael	
STREET ADDRESS	1900 Sast Street	
CITY-ST-ZIP	JACKSONVILLE FL 32226	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEAN VICTOR	
STREET ADDRESS	7823 Elvia Dr.	
CITY-ST-ZIP	JACKSONVILLE FL 32211	
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:

**SIGNATURE REQUIRED**

**04-28-03**

CR2E037 (10/02)