

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90408 009 ****61.25

DOCUMENT # N03000001985

1. Entity Name

GARDEN CITY UNITED METHODIST CHURCH, INC.



Principal Place of Business

3057 DUNN AVE.
JACKSONVILLE FL 32218

Mailing Address

3057 DUNN AVE.
JACKSONVILLE FL 32218

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

DUVAL

Zip

Country

DUVAL

4. FEI Number

59-2357454

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

SCRIBNER, LORETTA D
3057 DUNN AVE.
JACKSONVILLE FL 32218

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. 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

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE D ☐ Delete
NAME CAMPBELL, FRANK
STREET ADDRESS 15017 BRADDOCK RD
CITY-STATE-ZIP JACKSONVILLE FL 32218

TITLE T ☐ Delete
NAME STUART, JOCK
STREET ADDRESS 10253 BRIORCLIFF RD E.
CITY-STATE-ZIP JACKSONVILLE FL 32218

TITLE D ☐ Delete
NAME DEAN, BRENDA
STREET ADDRESS 9131 4TH AVE.
CITY-STATE-ZIP JACKSONVILLE FL 32208

TITLE D ☐ Delete
NAME IVEY, BOB
STREET ADDRESS 4444 KEY LARGO PLACE
CITY-STATE-ZIP JACKSONVILLE FL 32218

TITLE D ☐ Delete
NAME ALVAREZ, RICK
STREET ADDRESS 13816 ALVAREZ RD.
CITY-STATE-ZIP JACKSONVILLE FL 32218

TITLE D ☐ Delete
NAME BAILEY, FRANK
STREET ADDRESS 5530 LANNIE RD.
CITY-STATE-ZIP JACKSONVILLE FL 32218

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Ernest Frank Campbell Jr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-07

Date

Daytime Phone: #