

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N05922

1. Entity Name

PRESBYTERY OF ST. AUGUSTINE, INC.

FILED
Jan 22, 2000 8:00 am
Secretary of State

01-22-2000 90066 025 ****61.25

Principal Place of Business	Mailing Address
C/O EDWIN W. ALBRIGHT, JR. 1937 UNIVERSITY BOULEVARD WEST JACKSONVILLE FL 32217	C/O EDWIN W. ALBRIGHT, JR. 1937 UNIVERSITY BOULEVARD WEST JACKSONVILLE FL 32217-2013



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1937 UNIVERSITY BLVD. WEST	3. Mailing Address 1937 UNIVERSITY BLVD. WEST
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State JACKSONVILLE, FL	City & State JACKSONVILLE, FL
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4. FEI Number 59-6014964	Applied For <input type="checkbox"/> Not Applicable
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Zip 32217	Country USA	Zip 32217	Country USA
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WILLIAMS, MICHAEL E. 1937 UNIVERSITY BLVD W. JACKSONVILLE FL 32217	7. Name and Address of New Registered Agent Name PAUL K. HOOKER Street Address (P.O. Box Number is Not Acceptable) 1937 UNIVERSITY BLVD. WEST City JACKSONVILLE FL Zip Code 32217
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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 *Paul K. Hooker* **PAUL K. HOOKER, EXECUTIVE PRESBYTER** 11 JANUARY 2000
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																								
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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: *Paul K. Hooker* **PAUL K. HOOKER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11 JANUARY 2000

Date

904/733-8277

Daytime Phone #

CR2E037 (9/99)