

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000003012

1. Entity Name  
THE MERCY NETWORK OF CLAY COUNTY, INC.



FILED

2007 SEP 14 PM 2:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
198 KNIGHT BOXX  
MIDDLEBURG, FL 32068

Mailing Address  
198 KNIGHT BOXX  
MIDDLEBURG, FL 32068

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07102007 Chg-NP CR2E037 (12/06)

4. FEI Number  
75-3248816 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

BOWDEN, CATHY B  
198 KNIGHT BOXX  
MIDDLEBURG, FL 32068

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

Filing Fee is \$61.25  
Due by September 14, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME BOWDEN, CATHY B  
STREET ADDRESS 198 KNIGHT BOXX  
CITY-ST-ZIP MIDDLEBURG, FL 32068

TITLE ☐ Change ☐ Addition  
NAME 500109712785  
STREET ADDRESS 09/20/07--01048--016 \*\*\$61.25  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME MAYHALL, FAYE  
STREET ADDRESS 2795 COUNTY ROAD 220  
CITY-ST-ZIP MIDDLEBURG, FL 32068

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

TITLE SEC ☐ Delete  
NAME WRIGHT, GAMBLE L  
STREET ADDRESS 1707 BLANDING BOULEVARD  
CITY-ST-ZIP MIDDLEBURG, FL 32068

TITLE SEC/TREASURER ☐ Change ☐ Addition  
NAME WRIGHT, GAMBLE L.  
STREET ADDRESS 1717 BLANDING BLVD.  
CITY-ST-ZIP MIDDLEBURG, FL 32068

TITLE TRSR ☒ Delete  
NAME HINKLE, ANITA  
STREET ADDRESS 1707 BLANDING BOULEVARD  
CITY-ST-ZIP MIDDLEBURG, FL 32068

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

Cathy B. Bowden  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/07 (904)282-7229  
DATE DAYTIME PHONE #