FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham &

Secretary of State

DIVISION OF CORPORATIONS

1997
DOCUMENT #

N07872

(7)

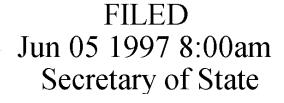
CENTRAL METROPOLITAN CHRISTIAN METHODIST EPISCOP AL CHURCH, INC.

Principal Place of Business

Mailing Address

4611 PEARL STREET JACKSONVILLE FL \$2208 4611 PEARL STREET

JACKSONVILLE FL 32206-6367





| SUCK CONTINUE | I L BESOV | ONORPONIELL IL UZEDO COCI | • | | | |
|--------------------------------|--|---|---|---|--|--|
| | | | | 3. Date Incorporated or Qualified 02/27/1985 | 3a. Date of Last 03/18/19 | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | | Applied For |
| 21 | | 26 | | 59-2670553 Not Applicab | | Not Applicable |
| Suite, Apt. #, etc. | | Suile, Apt. #, etc. | | 5. Certificate of Status Desired | d S8.75 Additional Fee Regulred | |
| City & State City & State | | City & State | ··· | 6. Election Campaign Financing \$5.00 May Be | | D May Be |
| 23 | | 28 | | Trust Fund Contribution | Addec Addec | d to Fees |
| Zip | Country | Zip | Country | 8. This corporation has liability for | | s. 199.032, |
| 24 | 25 | 29 3 | 0 | | Yes No | |
| | 9. Name and Address of Curren | t Registered Agent | B1 Name | 10. Name and Address of New Re | gistered Agent | |
| | | | 1-1 | Harlan K. Jon | 05 | |
| HONEYSUCKER, JOHN W SR. | | | 82 Street | t Address (P.O. Box Number is Not Acceptable). | | |
| 1138 TURTLE CREEK DR. | | | L_J | 1138 Turtle Creek DK | | |
| JACKSONVILLE FL 32218 | | | 83 | Jacksonville, FL 32218 | | |
| | | | 84 City | construction in | 85 Zip | Code |
| | | | | | | |
| 11. Pursuant | to the provisions of Sections 617.050 registered agent, or both, in the State | 2 and 617.1508, Florida Statutes of Florida, Such change was au | , the above-named thorized by the core | corporation submits this statement for the poration's board of directors. I hereby accept | ourpose of changing | its registered |
| agent. I a | m familiar wifi, and accept the obliga | ions of, Section 617.0503, Florid | da Statutes. | 6-78- | 27 | o rogioloida |
| SIGNATURE | Warlan 1. Ch | m 2- | | | (/ | |
| | Signature, typed or printed name of registered age | | Registered Agent signature | | DĂTE | |
| 12. | OFFICERS ANI | D DIRECTORS DELETE | 13. | ADDITIONS/CHANGES TO OFFIC | Change | |
| | I CONEC HADIAM K | C Deceie | 1.1 TITLE | | L Griange | Nontrou |
| NAME | JONES, HARLAN K | | 1,2 NAME | | | |
| STREET ADDRESS | 1138 TURTLE CREEK DR. | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32218 | OCIETE | 1.4 CITY-ST-ZIP | | —————————————————————————————————————— | 1 2 2 1 1 1 1 1 |
| TITLE | CS | DELETE | 2.1 TITLE | | L. Change | Addition |
| NAME | NICHOLS, LEON | | 2.2 NAME | | | |
| STREET ADDRESS | 6903 CARTIER CIRCLE | | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32208 | - Driett | 2. 4 CITY-ST-ZIP | | Channe | Addition |
| TITLE | CTR | ☐ DELETE | 3.1 TITLE | | Change | Addition |
| NAME | FRIALL, KEVIN | | 3.2 NAME | | | |
| STREET ADDRESS | 5532 VERNON ROAD | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32206 | Devete | 3.4. CITY-ST-ZIP | | 110 | The same of |
| TITLE | TR | ☐ DELETE | 4.1 TITLE | | Change | Addition |
| NAME , | WRIGHT, LATRICE | | 4. 2 NAME | | | |
| STREET ADORESS | 3132 ROSSELLE STREET | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32205 | N DELEGE | 4.4 CITY - ST - ZIP | Chowned | V A | 1 424 |
| TITLE | S ALASTI ALHIBAU | X DELETE | 5.1 TITLE | Steward | | Addition |
| NAME | MOTIN, CHUBBY | | 5.2 NAME | Stanton, Douglas | | |
| STREET ADDRESS | 12502 CANE CREEK COURT | | 5.3 STREET ADDRESS | 7710 Arble Drive | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32225 | | 5.4 CITY - ST - ZIP | Jacksonville, FL 32211 | | —————————————————————————————————————— |
| TITLE | TR | ☐ DELETE | 6.1 TITLE | | Change | Addition |
| Name | HOWARD, HILLIE | | 6.2 NAME | | | |
| STREET ADDRESS | 2230 COLLEGE CIRCLE | | 6.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32209 | | 6.4 CITY - ST - ZIP | | | THE STATE OF THE S |
| 44 1 4 6 6 6 6 6 | 419 41 44 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | 1 10 10 10 10 | | 1 1 0 1 1 0 1 1 1 0 1 1 1 0 1 1 1 1 1 1 | | |

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 13 if changed, or on an atjachment with an address.