

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33205

FILED
Jan 11, 2008
Secretary of State

Entity Name: MURRAY HILL UNITED METHODIST CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

%ELIZABETH L BOZEMAN
4101 COLLEGE ST
JACKSONVILLE, FL 322052392

New Principal Place of Business:

Current Mailing Address:

%ELIZABETH L BOZEMAN
4101 COLLEGE ST
JACKSONVILLE, FL 322052392

New Mailing Address:

FEI Number: 59-6002328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, MACK K
1240 KNOBB HILL DRIVE
JACKSONVILLE, FL 32221 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: EDMONDS, LINDA
Address: 1115 N. LANE AVE.
City-St-Zip: JACKSONVILLE, FL 32254

Title: VD/S () Delete
Name: BOZEMAN, ANNON I
Address: 10236 BEAR VALLEY RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: TR () Delete
Name: MCNEIL, GLENNIS
Address: 928 WOLFE ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: TR () Delete
Name: BOYD, JON
Address: 7924 WINTERWOOD DR NORTH
City-St-Zip: JACKSONVILLE, FL 32210

Title: TR () Delete
Name: CAPE, ART
Address: 5841 TRIUMPH LANE E.
City-St-Zip: JACKSONVILLE, FL 32244

Title: TR () Delete
Name: HOLLOWAY, MARK
Address: 2920 DOWNING ST.
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MACK K. KING

D

01/11/2008

Electronic Signature of Signing Officer or Director

Date