

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N36551

FILED
Apr 25, 2003
Secretary of State

Entity Name: SPRINGFIELD ECUMENICAL MINISTRIES, INC.

Current Principal Place of Business:

113 WEST 17TH STREET
JACKSONVILLE, FL 32206 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 13194
JACKSONVILLE, FL 33206 US

New Mailing Address:

FEI Number: 59-3003445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELKLEY, LEE N
113 WEST 17TH STREET
STE E
JACKSONVILLE, FL 32206 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: P () Delete
Name: WELKLEY, LEE N. REV.
Address: 113 WEST 17TH STREET
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: MCKETTY, NOEL
Address: 10858 ROCK ISLAND RD.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: EDWARDS, CLARENCE
Address: 1830 SILVER STREET
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: YOUNG, MARION
Address: 2115 COMMONWEALTH AVENUE
City-St-Zip: JACKSONVILLE, FL

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NOEL N MCKETTY

D

04/25/2003

Electronic Signature of Signing Officer or Director

Date