

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37227

1. Entity Name

RUNNERS FOR CHRIST, INC.

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90058 019 ****61.25

Principal Place of Business

Mailing Address

C/O DAVID L. MORRIS
8856 IRONGATE DRIVE
JACKSONVILLE FL 32244
US

C/O DAVID L. MORRIS
8856 IRONGATE DRIVE
JACKSONVILLE FL 32244-6300
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3019813

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MORRIS, DAVID L.
8856 IRONGATE DRIVE
JACKSONVILLE FL 32244

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.

SIGNATURE

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

TITLE PD ☐ Delete
NAME MORRIS, DAVID L.
STREET ADDRESS 8856 IRONGATE DRIVE
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE D ☐ Delete
NAME CURTIS, WILLIAM E. SR.
STREET ADDRESS 4857 APPLETON AVE.
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE D ☐ Delete
NAME FILLINGHAM, FREDDY
STREET ADDRESS 8112 JOFFRE DRIVE
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE D ☐ Delete
NAME REDMAN, DON
STREET ADDRESS 1814 DEAN ROAD
CITY-ST-ZIP JACKSONVILLE FL

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

TITLE D ☒ Delete
NAME HUDSON, HARLOD G.
STREET ADDRESS 6968 SENECA AVE.
CITY-ST-ZIP JACKSONVILLE FL

TITLE Director ☒ Change ☐ Addition
NAME Ronald Williams
STREET ADDRESS 5215 Highway Ave
CITY-ST-ZIP Jacksonville, FL 32205

TITLE D ☒ Delete
NAME SHOTT, DONALD
STREET ADDRESS 2006 ORLEAN DRIVE
CITY-ST-ZIP JACKSONVILLE FL

TITLE Director ☒ Change ☐ Addition
NAME Dave Browning
STREET ADDRESS 13703 Lanier Rd.
CITY-ST-ZIP Jacksonville, FL 32226

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: *David L. Morris* / *David L. Morris*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-00 904-777-6130
Date Daytime Phone #

CR2E037 (9/99)