

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Dec 02, 2010  
Secretary of State**

DOCUMENT# N39191

**Entity Name:** BUCKMAN BRIDGE UNITARIAN UNIVERSALIST SOCIETY, INC.**Current Principal Place of Business:**12447 MANDARIN ROAD  
JACKSONVILLE, FL 32223**New Principal Place of Business:**8447 MANRESA AVENUE  
JACKSONVILLE, FL 32073**Current Mailing Address:**P.O. BOX 844  
ORANGE PARK, FL 32067**New Mailing Address:**

FEI Number: 59-3010981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**WILLIAMSON, ROBERT V  
2831 CIRCLE RIDGE DR.  
ORANGE PARK, FL 32065 US**Name and Address of New Registered Agent:**EDWARDS-ROINE, PAMELA A  
1744 SILVER STREET  
JACKSONVILLE, FL 32206 US

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: PAMELA EDWARDS-ROINE

12/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: EDWARDS-ROINE, PAMELA  
Address: 1744 SILVER STREET  
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: VD  
Name: KINES, KRIS  
Address: 2404 EGREMONT DRIVE  
City-St-Zip: ORANGE PARK, FL 32073 US

Title: SD  
Name: SHRADER, CARL  
Address: 1736 MOSSY CYPRESS LANE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: TD  
Name: CHRISTIANSEN, CHRISTOPHER  
Address: 1510 LAVILLA DRIVE, NORTH  
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: TSTE  
Name: SMART, MARILYN  
Address: 45 PHILLIPS AVENUE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: TSTE  
Name: TEAL, ELIZABETH  
Address: 1047 PLAINFIELD AVE  
City-St-Zip: ORANGE PARK, FL 32073

I hereby 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 all other like empowered.

SIGNATURE: PAMELA EDWARDS-ROINE

PD

12/02/2010

Electronic Signature of Signing Officer or Director

Date