2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State
03-16-2001 90072 002 ****61.25

0013853

DOCUMENT # N42909

1. Entity Name

FAITH COMMUNITY FELLOWSHIP, INC.

Principal Place of Business	Mailing Address
FAITH COMMUNITY FELLOWSHIP 3264 TOWNSEND BLVD JACKSONVILLE FL 32277-2751 US	FAITH COMMUNITY FELLOWSHIP 3264 TOWNSEND BLVD JACKSONVILLE FL 32277-2751 US

U00260S3

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3054501 ☐ Applied For ☐ Not Applicable

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
CROOK, PERCY 10961 CHALLEUX SOUTH JACKSONVILLE FL 32225	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 Percy L Crook
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	S CROOK, PERCY 10961 CHALLEUX S. JACKSONVILLE FL 32225	☐ Delete	Mr. Hamn, Anthony 4423 Fern Creek Drive Jacksonville Florida 32277	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEWIS, HERD 939 MILLARD COURT JACKSONVILLE FL 32225	☐ Delete	D LEWIS, HERBERT 939 MILLARD COURT WEST JACKSONVILLE, FL 32225	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCDUTTIE, CHARLES 851 WEST COLONIAL COURT JACKSONVILLE FL 32225	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, ROY 7170 SAN SOUCI JACKSONVILLE FL 32216	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCARBOROUGH, BOB 3856 BESS ROAD JACKSONVILLE FL	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: Herbert Lewis 2-26-2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #