

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90219 002 ****61.26

DOCUMENT # N51203

1. Entity Name
THE FIRST CHRISTIAN CHURCH OF THE BEACHES, INC.



Principal Place of Business

**2125 OCEAN FRONT
NEPTUNE BEACH FL 32266**

Mailing Address

**2125 OCEAN FRONT
NEPTUNE BEACH FL 32266**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1165595**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**HIBBARD, JOHN E.
2125 FIRST ST
NEPTUNE BEACH FL 32266**

7. Name and Address of New Registered Agent

Name

Barre Barrett

Street Address (P.O. Box Number is Not Acceptable)

2601 South Second Street

City

Jacksonville Beach

FL

Zip Code
32250

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Barre Barrett

Barre Barrett

04/17/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HIBBARD, JOHN E.	
STREET ADDRESS	2125 FIRST ST	
CITY-ST-ZIP	NEPTUNE BEACH FL	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BARRETT, NANCY	
STREET ADDRESS	2601 SOUTH SECOND STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	D	<input type="checkbox"/> Delete
NAME	MILLS, BETTY	
STREET ADDRESS	1100 N. 11TH STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	D	<input type="checkbox"/> Delete
NAME	TERRELL, JERRY	
STREET ADDRESS	1862 TIERRA VERDE DR	
CITY-ST-ZIP	ATLANTIC BEACH FL 32233	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JORDAN, DONALD	
STREET ADDRESS	1423 FOREST AVE	
CITY-ST-ZIP	NEPTUNE BEACH FL 32266	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barre Barrett	
STREET ADDRESS	2601 South Second Street	
CITY-ST-ZIP	Jacksonville Beach, FL 32250	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Phyllis Scott	
STREET ADDRESS	21B Ponte Vedra Court	
CITY-ST-ZIP	Ponte Vedra Beach, FL 32082	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Zellars	
STREET ADDRESS	4123 Stacey Road	
CITY-ST-ZIP	Jacksonville, FL 32250	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Barre Barrett

Barre Barrett Board Chairman 904/246-9768

CR2E037 (10/02)