

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

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90172 014 ****61.25

DOCUMENT # N93000000906

1. Entity Name
SHEPHERD'S CENTER OF ORANGE PARK, INC.



Principal Place of Business

**2105 PARK AVE
STE 1
ORANGE PARK FL 32073
US**

Mailing Address

**2105 PARK AVE
STE 1
ORANGE PARK FL 32073
US**

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 **59-3177835**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOORE, WILLIAM V
1349 SOUTH SHORE DR
ORANGE PARK FL 32073**

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

SIGNATURE *William V. Moore*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 25, 2003

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	C	☐ Delete
NAME	MOORE, WILLIAM V	
STREET ADDRESS	1349 SOUTH SHORE DR	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	VC	☐ Delete
NAME	RILEY, VERA	
STREET ADDRESS	28 WIDNER WAY	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	S	☐ Delete
NAME	CRAIG, JOYCE	
STREET ADDRESS	40 BELMONT BLVD	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	T	☐ Delete
NAME	WAIS, JAMES	
STREET ADDRESS	1955 CATTLE GAP	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	D	☐ Delete
NAME	WALKER, WILLIAM	
STREET ADDRESS	1727 GROVE PARK DR.	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	D	☒ Delete
NAME	WALKER, NANCY	
STREET ADDRESS	1727 GROVE PARK DR.	
CITY-ST-ZIP	ORANGE PARK FL 32073	

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ 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: *William V. Moore*

Jan 25, 2003 264-2973

CR2E037 (10/02)