2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # N99000002766 Entity Name CONCORD BAPTIST CHRISTIAN FAMILY CENTER, INC. 03-20-2000 90027 002 ****61.25 Mailing Address Principal Place of Business 10960 INDIES DRIVE SOUTH 10960 INDIES DRIVE SOUTH JACKSONVILLE FL 32246-2458 JACKSONVILLE FL 32246 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 59 - 3410115 Applied For City & State City & State Not Applicable Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) NEAL, A L 10960 INDIES DRIVE SOUTH JACKSONVILLE FL 32246 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be П Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME NEAL, A L STREET ADDRESS STREET ADDRESS 10960 INDIES DRIVE SOUTH CITY-ST-ZIP CITY-ST-ZIP Jacksonville FL 32246 ☐ Change ■ Addition ☐ Delete TITLE TITLE D NAME DOWNEY, WAYNE L NAME STREET ADDRESS STREET ADDRESS 1308 CESERY BLVD. CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32211 ☐ Change Addition ☐ Delete TITLE TITLE NAME JONES, SHARON NAME STREET ADDRESS STREET ADDRESS 1308 CESERY BLVD. CITY-ST-ZIP CITY-ST-ZIP Jacksonville FL 32211 Change Addition ☐ Delete TITI F TITLE NAME NAME BONNER, BEVERLY B STREET ADDRESS STREET ADDRESS 1308 CESERY BLVD. CITY-ST-ZIP CITY-ST-ZIP Jacksonville FL 32211 ☐ Change ☐ Addition TITLE TITLE ☐ Delete BROWN, BENNY NAME NAME STREET ADDRESS STREET ADDRESS 1308 CESERY BLVD. CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32211 Change TITLE ☐ Delete TITLE Addition NAME NAME JONES, A L STREET ADDRESS STREET ADDRESS 1308 CESERY BLVD. CITY-S1-ZIP CITY-ST-ZIP JACKSONVILLE FL 32211

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.

904 **6**269-8167