

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726259

**Entity Name:** ISLE OF FAITH UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

1821 SAN PABLO RD S  
JACKSONVILLE, FL 32224-1031

**Current Mailing Address:**

1821 SAN PABLO RD S  
JACKSONVILLE, FL 32224-1031

**FEI Number:** 59-2085823

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FLETCHER, HUGH M  
24 NORTH MARKET STREET  
305  
JACKSONVILLE, FL 32202 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name OAKES, LESTER M  
Address 14063 PINE ISLAND DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

Title D  
Name LIEDTKE, DAVID  
Address 1158 LINKSIDE COURT E  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D  
Name BRYAN, MOLLY  
Address 2890 CANYON FALLS DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

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:** LESTER M. OAKES

DP

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date