

2025 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:**UTTER, BOB
14140 DRAKES POINT CT
JACKSONVILLE, FL 32224 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:** BOB UTTER

01/09/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRUSTEE, CHAIR PERSON
Name UTTER, BOB
Address 14140 DRAKES POINT DR
City-State-Zip: JACKSONVILLE FL 32224

Title COUNCIL, CHAIR PERSON
Name HIBBLE, PATTY
Address 14266 FALCONHEAD COURT
City-State-Zip: JACKSONVILLE FL 32224

Title TREASURER, CHAIR PERSON
Name MOULIN, DEBORAH SUE
Address 1440 SUN MARSH DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title FINANCE, CHAIR PERSON
Name MOULIN, DEBORAH SUE
Address 1440 SUN MARSH DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title SPRC, CHAIR PERSON
Name KINDER, JANICE
Address 1315 16TH AVENUE NORTH
City-State-Zip: JACKSONVILLE BEACH FL 32250

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: BOB UTTER

TRUSTEE CHAIR

01/09/2025

Electronic Signature of Signing Officer/Director Detail

Date