

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007580

Entity Name: JENNINGS UNITED METHODIST CHURCH, INC.**Current Principal Place of Business:**1371 MCCALL STREET
JENNINGS, FL 32053**Current Mailing Address:**PO BOX 13
JENNINGS, FL 32053**FEI Number:** 42-1574523**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WYNN, JACKIE
1371 MCCALL STREET
JENNINGS, FL 32053 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:** JACKIE WYNN

03/02/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title COUNCIL MEMBER
Name WYNN, EDDIE
Address 1642 NW 5TH STREET
City-State-Zip: JENNINGS FL 32053

Title COUNCIL MEMBER
Name CARTER, BRENDA B
Address PO BOX 215
City-State-Zip: JENNINGS FL 32053

Title COUNCIL MEMBER
Name GRIFFIN, ANNAREE
Address 4274 NW 19TH TER
City-State-Zip: JENNINGS FL 32053

Title COUNCIL CHAIR
Name STEEDLEY, JUDY
Address 5784 SW 61ST AVE
City-State-Zip: JASPER FL 32052

Title SECRETARY, TREASURER
Name WYNN, JACKIE
Address 1642 NW 5TH ST
City-State-Zip: JENNINGS FL 32053

Title COUNCIL MEMBER
Name GRINER, LANCE
Address 11322 NE 40TH ST
City-State-Zip: JASPER FL 32052

Title PASTOR
Name TURBEVILLE, MISSY
Address 126 8TH ST SW
City-State-Zip: JASPER FL 32052

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: JACKIE WYNN**SECRETARY**

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date