

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000006308

Entity Name: INMAN METHODIST FOOD PANTRY AND FELLOWSHIP INC.

Current Principal Place of Business:

5815 PICKETTVILLE RD
JACKSONVILLE, FL 32254

Current Mailing Address:

5815 PICKETTVILLE RD
JACKSONVILLE, FL 32254 US

FEI Number: 83-0871301

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WING, GENEVIEVE R
5815 PICKETTVILLE RD
JACKSONVILLE, FL 32254 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 PD
Name MAXWELL, EARL
Address 5815 PICKETTVILLE RD
City-State-Zip: JACKSONVILLE FL 32254

Title TD
Name MAXWELL, SUZANNE
Address 5815 PICKETTVILLE RD
City-State-Zip: JACKSONVILLE FL 32254

Title SD
Name WING, GENEVIEVE R
Address 5815 PICKETTVILLE RD
City-State-Zip: JACKSONVILLE FL 32254

Title D
Name HOLTON, DALE
Address 5815 PICKETTVILLE RD
City-State-Zip: JACKSONVILLE FL 32254

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: GENEVIEVE R WING

SECT/ TRES.

02/10/2025

Electronic Signature of Signing Officer/Director Detail

Date