2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2025
Secretary of State
1012170827CC

DOCUMENT# N96000003517

Entity Name: METHODIST CHILDREN'S VILLAGE, INC.

Current Principal Place of Business:

7915 HERLONG ROAD
JACKSONVILLE, FL 32210

Current Mailing Address:

7915 HERLONG ROAD
JACKSONVILLE, FL 32210

FEI Number: 59-3414968

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATERNO, KELLY S
7915 HERLONG ROAD
JACKSONVILLE, FL 32210 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: KELLY S PATERNO 02/11/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	BURGESS, MARGE
Address	4815 MAID MARIAN LANE
City-State-Zip:	JACKSONVILLE FL 32210

Title	TREASURER
Name	BUNNELL, WYNELLE
Address	4444 COUNTRY CLUB ROAD
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	PATERNO, KELLY S
Address	4724 BLACKBURN ST
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	MOONEYHAN, HENRY
Address	8319 CROSS TIMBERS DRIVE EAST
City-State-Zip:	JACKSONVILLE FL 32244

Title	DIRECTOR
Name	BUNNELL, RICHARD
Address	4444 COUNTRY CLUB ROAD
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	WELCH, BENJAMIN
Address	4846 DUCHENEAU DRIVE
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	RAY, TROY
Address	1647 LONDONDERRY RD.
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	NORVILLE, SUSAN
Address	7915 HERLONG ROAD
City-State-Zip:	JACKSONVILLE FL 32210

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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: KELLY S. PATERNO EXECUTIVE DIRECTOR 02/11/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	MYRICK, MARILYN
Address	2750 ALVARADO AVE.
City-State-Zip:	JACKSONVILLE FL 32217