

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000003255

**FILED**  
**Apr 13, 2015**  
**Secretary of State**  
**CC0461919416**

**Entity Name:** UNITED MINISTRIES CHURCH OF JACKSONVILLE  
INCORPORATED

**Current Principal Place of Business:**

9802-12 BAYMEADOWS RD  
PMB 159  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

9802-12 BAYMEADOWS RD  
PMB 159  
JACKSONVILLE, FL 32256 `

**FEI Number: 26-1765231**

**Certificate of Status Desired: Yes**

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

WILLIAMS, RODERICK PASTOR  
9802-12 BAYMEADOWS RD  
PMB 159  
JACKSONVILLE, FL 32256 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 P  
Name WILLIAMS, RODERICK APASTOR  
Address 9802-12 BAYMEADOWS ROAD PMB  
159  
City-State-Zip: JACKSONVILLE FL 32256

Title VP  
Name WILLIAMS, TAKETA MPASTOR  
Address 9802-12 BAYMEADOWS ROAD PMB  
159  
City-State-Zip: JACKSONVILLE FL 32256

Title O  
Name DAVIS, TONYA ELDER  
Address 9802-12 BAYMEADOWS ROAD PMB  
159  
City-State-Zip: JACKSONVILLE FL 32256

Title O  
Name MURRAY, MONIQUE  
Address 9802-12 BAYMEADOWS RD PMB 159  
City-State-Zip: JACKSONVILLE FL 32256

*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: RODERICK WILLIAMS**

**PRESIDENT**

**04/13/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date