2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# 708127

Entity Name: MUSEUM OF SCIENCE AND HISTORY OF JACKSONVILLE, INC.

Current Principal Place of Business:

1025 MUSEUM CIRCLE
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1025 MUSEUM CIRCLE
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-0651090 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DUNDON, MARGO
1025 MUSEUM CIRCLE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	C	( ) Delete
Name:	FLETCHER, JOHN	
Address:	672 OCEAN BLVD.	
City-St-Zip:	ATLANTIC BEACH, FL 32233	
Title:	VC	( ) Delete
Name:	NEWTON, WILL	
Address:	1445 EDGEWOOD CIR	
City-St-Zip:	JACKSONVILLE, FL 32205	
Title:	TT	( ) Delete
Name:	RYZEWIC, SUSAN	
Address:	5000 SAWGRASS VILLAGE DRIVE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	S	( ) Delete
Name:	STEVENS, DWAINE	
Address:	8524 BANDERA CIR. E	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	IPC	( ) Delete
Name:	RUMMELL, LEE ANN	
Address:	2538 RIVER RD.	
City-St-Zip:	JACKSONVILLE, FL 32207	
Title:	ALT	(X) Delete
Name:	BAKER, STEW	
Address:	PO BOX 2340	
City-St-Zip:	JACKSONVILLE, FL 32202	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN FLETCHER C 07/01/2005

Electronic Signature of Signing Officer or Director — Date