

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 711688

FILED  
Apr 29, 2002 8:00 AM  
Secretary of State

Entity Name: JACKSONVILLE HUMANE SOCIETY, INC.

**Current Principal Place of Business:**

8464 BEACH BOULEVARD  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

8464 BEACH BOULEVARD  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 59-0624410

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TYDE, MICHAEL S  
4004 ATLANTIC BLVD.  
JACKSONVILLE, FL 32207

**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: PD ( ) Delete  
Name: TYDE, MICHAEL  
Address: 4004 ATLANTIC BLVD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD ( ) Delete  
Name: HOAG, DEBORRAH  
Address: 727 EGRET BLUFF LANE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD ( ) Delete  
Name: PHILLIPS, CRAIG  
Address: 9004 DEERCRESS CT  
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD ( ) Delete  
Name: SAYER, OLIVIA  
Address: P.O. BOX 350577  
City-St-Zip: JACKSONVILLE, FL 322350577

Title: ED ( ) Delete  
Name: WHITE, SONYA  
Address: 8464 BEACH BLVD  
City-St-Zip: JACKSONVILLE, FL 32216

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: PEPPER, DAVID  
Address: 215 CENTURY 21 DR  
City-St-Zip: JACKSONVILLE, FL 32216

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

Title: SD (X) Change ( ) Addition  
Name: DIAMOND, ELIZABETH  
Address: 11459 FT GEORGE RD  
City-St-Zip: JACKSONVILLE, FL 32226

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: SONYA WHITE

ED

04/29/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date