FILE NOW: FILING FEE IS $61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

200001780912
-04/15/96--01119--014
***61.25

DOCUMENT # **717857** **(7)**

1. Corporation Name
CLARA WHITE MISSION

Principal Place of Business	Mailing Address
613 WEST ASHLEY ST JACKSONVILLE FL 32202-4747	613 WEST ASHLEY ST JACKSONVILLE FL 32202-4747

3. Date Incorporated or Qualified: 01/09/1970
3a. Date of Last Report: 02/22/1995

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-6002104 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~BAKER, RONALD~~
~~21 WEST CHURCH STREET~~
~~JACKSONVILLE FL 32202~~

10. Name and Address of New Registered Agent

81 Name: ERNEST JAMESON
82 Street Address (P.O. Box Number is Not Acceptable): 2025 CARL ROAD
83:
84 City: JACKSONVILLE FL 85 Zip Code: 32202

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Ernest Jameson
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BAKER, RONALD 21 WEST CHURCH STREET JACKSONVILLE FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P ERNEST JAMESON 2025 CARL ROAD JACKSONVILLE, FL 32209	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SWEET, WILLIAM 421 WEST CHURCH STREET JACKSONVILLE FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP SANDRA HULL RICHARDSON 421 W. CHRUCH STREET JACKSONVILLE, FL 32202	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DICKERSON, PENNY 218 WEST ADAMS STREET JACKSONVILLE FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S LAURIE-ELLEN SMITH 4976 SAN JOSE BLVD #215 JACKSONVILLE, FL 32207	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JAMESON, ERNEST 2025 CARL ROAD JACKSONVILLE FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T DWINELLE FORD 1897 BEACH AVENUE JACKSONVILLE, FL 32233	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT ANDERSON, MAX 2001 ART MUSEUM DRIVE JACKSONVILLE FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	AT ELEANOR HUGHES 5798 SHARING CROSS ROAD JACKSONVILLE, FL 32257	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GERGORY, BERNARD 8430 EAST SOPHIST JACKSONVILLE FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D JU'COBY PITTMAN 613 WEST ASHLEY STREET JACKSONVILLE, FL 32202	☐ Change ☒ Addition

T=THE CLARA WHITE MISSION, INC. 4/15/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ju'Coby Pittman 3/21/96 3544162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)