2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004
Secretary of State

DOCUMENT# 740244

Entity Name: THE JACKSONVILLE MUSEUM OF MODERN ART, INC.

Current Principal Place of Business:

701 RIVERSIDE PARK PL., #120
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

333 NORTH LAURA STREET
JACKSONVILLE, FL 32202 US

Current Mailing Address:

P.O. BOX 40248
JACKSONVILLE, FL 32203 US

New Mailing Address:

333 NORTH LAURA STREET
JACKSONVILLE, FL 32202 US

FEI Number: 59-0689705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAVEN, JANE C
701 RIVERSIDE PARK PL., #120
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

CRAVEN, JANE C
333 NORTH LAURA STREET
JACKSONVILLE, FL 32202 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: _____ 03/30/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CRAVEN, JANE C
Address: 701 FISK ST.
City-St-Zip: JACKSONVILLE, FL 32204

Title: CD ( ) Delete
Name: MILAM, ARTHUR
Address: P O BOX 446 N/A
City-St-Zip: PONTE VEDRA BEACH, FL 32207

Title: TD ( ) Delete
Name: BOWER, PETER
Address: P.O. BOX 1918 N/A
City-St-Zip: JACKSONVILLE, FL 32201

Title: SD ( ) Delete
Name: CAMPBELL, JOZETTE
Address: 30 20TH ST.
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CRAVEN, JANE C
Address: 333 NORTH LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: CD (X) Change ( ) Addition
Name: MILAM, ARTHUR
Address: P O BOX 446
City-St-Zip: PONTE VEDRA BEACH, FL 32204

Title: TD (X) Change ( ) Addition
Name: BOWER, PETER
Address: P.O. BOX 1918
City-St-Zip: JACKSONVILLE, FL 32201

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: JANE C. CRAVEN P 03/30/2004
Electronic Signature of Signing Officer or Director — Date