

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740244

FILED
Mar 21, 2005
Secretary of State

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

Current Principal Place of Business:

333 NORTH LAURA STREET
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

333 NORTH LAURA STREET
JACKSONVILLE, FL 32202 US

New Mailing Address:

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

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

Title: TD () Delete
Name: BOWER, PETER
Address: P.O. BOX 1918
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: CEO (X) Change () Addition
Name: CRAVEN, JANE C
Address: 333 NORTH LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32202 US

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

Title: TD (X) Change () Addition
Name: BOWER, PETER
Address: 1301 RIVERPLACE BLVD., SUITE 2130
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD (X) Change () Addition
Name: CAMPBELL, JOZETTE
Address: 2055 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233

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

CEO

03/21/2005

Electronic Signature of Signing Officer or Director

Date