

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 10:42

DOCUMENT # 758352 (9)

1. Corporation Name

SIX THOUSAND ASSOCIATION, INC.

Principal Place of Business

SIX THOUSAND ON THE RIVER
6000 SAN JOSE BLVD., UNIT 302
JACKSONVILLE FL 32217

Mailing Address

SIX THOUSAND ON THE RIVER
6000 SAN JOSE BLVD., UNIT 302
JACKSONVILLE FL 32217

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1981

3a. Date of Last Report

03/28/1994

4. FEI Number

59-2112696

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental
Fee Not Required

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

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

9. Name and Address of Current Registered Agent

DUSS, JOHN S., IV
1600 ATLANTIC BANK BLDG, PO BOX 479
JACKSONVILLE FL 32201

10. Name and Address of New Registered Agent

81 Name

ELEFANT, FRED

82 Street Address (P.O. Box Number is Not Acceptable)

1650 PRUDENTIAL DRIVE, SUITE 105

83

POST OFFICE BOX 749

84

JACKSONVILLE, FLORIDA

FL

85 Zip Code

32201

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed in continuation of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

Fred Elephant

3-8-95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

MCLEAR, WILLIAM Z.

6000 SAN JOSE BLVD #302

JACKSONVILLE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD

BEAR, JACK I.

6000 SAN JOSE BLVD #1001

JACKSONVILLE, FL 00000

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD

LIBBY, LEWIS G.

6000 SAN JOSE BLVD #102

JACKSONVILLE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

YD

HOFFENBERG, BENNIE

6000 SAN JOSE BLVD. #408

JACKSONVILLE, FL 00000

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

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☐ Change ☐ Addition

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)(b), 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:

Wm. Z. M'Leary Pres
Wm. Z. M'Leary

3/16/95

904-393-2938