

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 12, 2010
Secretary of State

Entity Name: JACKSONVILLE AREA LEGAL AID FOUNDATION, INC.

Current Principal Place of Business:

126 W. ADAMS ST.
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

126 W. ADAMS ST.
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 20-5007302 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FIGGINS, MICHAEL
126 W. ADAMS ST.
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: D
Name: COTNEY, HUGH
Address: 233 E. BAY ST., STE. 905
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: DUVALL, JOHN
Address: 225 WATER STREET, SUITE 710
City-St-Zip: JACKSONVILLE, FL 32203

Title: D
Name: HARRELL, RENEE
Address: 4735 SUNBEAM RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D
Name: SLATER, THOMAS
Address: ONE INDEPENDENT DRIVE, STE 1900
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: MURPHY, VICKEY
Address: 1015 NORTH LIBERTY ST.
City-St-Zip: JACKSONVILLE, FL 32206

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL FIGGINS

RA

04/12/2010

Electronic Signature of Signing Officer or Director

Date