

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11461

FILED
Feb 25, 2008
Secretary of State

Entity Name: RONALD MCDONALD HOUSE OF JACKSONVILLE, INC.

Current Principal Place of Business:

824 CHILDREN'S WAY
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

824 CHILDREN'S WAY
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-2625008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFAYE, BROCK, & ASSOCIATES, PA
1301 RIVERPLACE BLVD.
STE. 2400
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

LAFAYE, BROCK, & ASSOCIATES, PA
501 RIVERSIDE AVENUE
STE. 800
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:

02/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMPSON, JOSEPH
Address: 5220 BELFORT ROAD, STE 100
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Delete
Name: HOLLAND, GREGORY
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: T () Delete
Name: JOHNSON, MELVIN
Address: 1 INDEPENDENT DRIVE, STE 2901
City-St-Zip: JACKSONVILLE, FL 32202

Title: ED () Delete
Name: HARDAKER, JOY C
Address: 824 CHILDREN'S WAY
City-St-Zip: JACKSONVILLE, FL 32207

Title: S () Delete
Name: HARRELL-DEVINE, APRIL
Address: 4800 DEERWOOD CAMPUS PKWY.
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: TOUSEY, CLAY B
Address: 1 INDEPENDENT DRIVE, STE 2600
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOLLAND, GREG
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: VP (X) Change () Addition
Name: JOHNSON, MELVIN
Address: ONE INDEPENDENT DRIVE STE. 2901
City-St-Zip: JACKSONVILLE, FL 32202

Title: T (X) Change () Addition
Name: TOUSEY, CLAY
Address: 1 INDEPENDENT DRIVE, STE 2600
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: S (X) Change () Addition
Name: ECCHER, ANDY
Address: 9985 PRITCHARD ROAD
City-St-Zip: JACKSONVILLE, FL 32219

Title: D (X) Change () Addition
Name: HARRELL-DEVINE, APRIL
Address: 4800 DEERWOOD CAMPUS PKWY
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOY C. HARDAKER

ED

02/25/2008

Electronic Signature of Signing Officer or Director

Date