2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11461

FILED Feb 09, 2012 Secretary of State

Entity Name: RONALD MCDONALD HOUSE CHARITIES OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business:

824 CHILDREN'S WAY JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

824 CHILDREN'S WAY JACKSONVILLE, FL 32207

FEI Number: 59-2625008 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LBA CERTIFIED PUBLIC ACCOUNTANTS, 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: SCHWARTZ, RYAN

Address: 5011 GATE PARKWAY, STE 150 City-St-Zip: JACKSONVILLE, FL 32256

Title: VP

Name: YOUNG, O. WAYNE
Address: 13865 DEER CHASE PLACE
City-St-Zip: JACKSONVILLE, FL 32224

Title: T

Name: CUNKLE, AUSTIN C

Address: 501 RIVERSIDE AVENUE, 11TH FL City-St-Zip: JACKSONVILLE, FL 32202

Title: ED

 Name:
 HARDAKER, JOY C

 Address:
 824 CHILDREN'S WAY

 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: 5

Name: PAXTON, ROB

Address: 7077 BONNEVAL ROAD, STE. 500 City-St-Zip: JACKSONVILLE, FL 32216

Title:

 Name:
 MCLAUCHLAN, KRISTIN

 Address:
 822 A1A NORTH, STE 101

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082

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: JOY C. HARDAKER ED 02/09/2012