


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90288 050 \*\*\*\*61.25

**DOCUMENT # N13618**  
 1. Entity Name  
**JACKSONVILLE GEM AND MINERAL SOCIETY, INC.**



Principal Place of Business <b>JACKSONVILLE GEM &amp; MINERAL SOCIETY, INC.          4371 PHILLIPS HWY          JACKSONVILLE, FL 32207 US</b>	Mailing Address <b>JACKSONVILLE GEM &amp; MINERAL SOCIETY, INC          4371 PHILLIPS HWY          JACKSONVILLE, FL 32207 US</b>
--	---



01212004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2931144</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**JOHNSON, DIANNE R  
 10215 MACON RD.  
 JACKSONVILLE, FL 32219**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, DIANNE R 10215 MACON RD. JACKSONVILLE, FL 32219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, DEXTER PO BOX 47173 JACKSONVILLE, FL 32247
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THOMPSON, INGER 9054 INWOOD TERR. JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PRICE, ED 7038 HAFFORD LN. JACKSONVILLE, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, ED 10215 MACON RD. JACKSONVILLE, FL 32216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HEATH, VIVIAN 2022 INWOOD TERR. JACKSONVILLE, FL 32207

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dianne R. Johnson* **Dianne R. Johnson** 4/07/04 (904) 768-8442  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*Attachment*

*# N13618*

*44027351*

City, State JACKSONVILLE FL  
Zip Code & Country 32219

Title PD  
Name (Last, First, Middle, Title) CARLSON EARL

-or- Entity Name  
Street Address 1631 McCAUL ROAD  
City, State JACKSONVILLE FL  
Zip Code & Country 32220

Title TD  
Name (Last, First, Middle, Title) HEATH VIVIAN

-or- Entity Name  
Street Address 2022 INWOOD TERR.  
City, State JACKSONVILLE FL  
Zip Code & Country 32207

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title PRES  
Officer/Director Signature

Continue Reset

Start Over

Sunbiz Home Page

Public Access Help



Division of Corporations

#N13618

44027351

Annual Report

Page 2

Document Number

N13618

Business Entity Name

JACKSONVILLE GEM AND MINERAL SOCIETY, INC.

Election Campaign Financing Trust Fund Contribution  Yes  No

Officer/Director Name And Address

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address