

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13618

FILED
Apr 18, 2012
Secretary of State

Entity Name: JACKSONVILLE GEM AND MINERAL SOCIETY, INC.

Current Principal Place of Business:

JACKSONVILLE GEM & MINERAL SOCIETY, INC.
6653 POWERS AVE, SUITE 132
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

JACKSONVILLE GEM & MINERAL SOCIETY, INC.
6653 POWERS AVE, SUITE 132
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 59-2931144 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SIVER, CURTIS K
829 E DOTY BRANCH LANE
JACKSONVILLE, FL 32259 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: HAMILTON, JASON
Address: 7141 NATAL AVE
City-St-Zip: JACKSONVILLE, FL 32254

Title: P
Name: PRICE, ED
Address: 7038 HAFFORD LN
City-St-Zip: JACKSONVILLE, FL 32244

Title: S
Name: JOHNSON, CARLA
Address: 8201 GREEN PARROT RD #205
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: SNOW, BILL
Address: 1028 MEADOWVIEW LANE
City-St-Zip: ST AUGUSTINE, FL 32085

Title: VP
Name: FRAME, TOM
Address: 3133 CHAPELWOOD LN
City-St-Zip: JACKSONVILLE, FL 32216

Title: T
Name: WEBB, MARI
Address: 11133 NEBRASKA AVE
City-St-Zip: JACKSONVILLE, FL 32219

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: ED PRICE

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04/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date