

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41211

FILED  
Apr 04, 2005  
Secretary of State

Entity Name: JAX TRANSIT MANAGEMENT CORP.

**Current Principal Place of Business:**

100 N. MYRTLE AVE.  
JACKSONVILLE, FL 322041310

**New Principal Place of Business:**

**Current Mailing Address:**

100 N. MYRTLE AVE.  
JACKSONVILLE, FL 322041310

**New Mailing Address:**

FEI Number: 59-3041602      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EDCOLAW, INC.  
6 EAST BAY STREET  
STE 500  
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: DP ( ) Delete  
Name: JURY, THOMAS,  
Address: 100 N. MYRTLE ST.  
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete  
Name: CRITTENDEN, DEMETRUS  
Address: 100 N. MYRTLE ST.  
City-St-Zip: JACKSONVILLE, FL

Title: ST ( ) Delete  
Name: JACOBS, GARY  
Address: 100 N. MYRTLE ST.  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: DOMINY, MATTHEW  
Address: 100 N. MYRTLE AVE.  
City-St-Zip: JACKSONVILLE, FL 322041310

Title: D ( ) Delete  
Name: BLAYLOCK, MICHAEL J  
Address: 100 N. MYRTLE AVE.  
City-St-Zip: JACKSONVILLE, FL 322041310

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: JERRIS, CHARLES T  
Address: 100 N. MYRTLE ST.  
City-St-Zip: JACKSONVILLE, FL

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

Title: D (X) Change ( ) Addition  
Name: GULLIVER, DANIEL  
Address: 100 N. MYRTLE AVE.  
City-St-Zip: JACKSONVILLE, FL 322041310

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS JURY

DP

04/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date