

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

ANNUAL REPORT

1995



APPROVED
FILED

05/12/16

DOCUMENT # 737127 (1)

EAST WIND LAKE VILLAGE CONDOMINIUM ASSOCIATION, INC.

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

1. Name of Corporation		2a. Mailed Address		3. Date of Report		3a. Date of Last Report	
461 N.W. 98 CT MIAMI FL 33172		P.O. BOX 526500 MIAMI FL 33152-6500 US		10/25/1976		05/01/1994	
2. Officers and Directors		2b. Mailed Address		4. Filing Number		5. Certificate of Status Desired	
21		26		59-1721248		☐ \$8.75 Additional Fee Required	
22		27		6. Filing Fee		☐ \$5.00 May Be Added to Fees	
23		28		7. Management with IRS		☐ \$68.75 Supplemental Fee Not Required	
24		29		8. The corporation has received, for information, the notice of the Department of Banking and Finance		☒ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LOURDES DELCALVO 461 N.W. 98 CT. MIAMI FL 33172		B1 Name B2 Street Address B3 City B4 State B5 Zip Code	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct statement of the facts and circumstances as stated above, and that the same are true and correct to the best of my knowledge and belief.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONAL OFFICERS AND DIRECTORS
T ALBERT, UNWOOD J. 461 N.W. 98TH CT. MIAMI, FL 00000 33172 P GONZALEZ, CRISTINA 461 N.W. 98TH CT. MIAMI, FL 00000 33172 D AZOY, JORGE 461 N.W. 98TH CT. MIAMI, FL 00000 33172 D CARDELLE, THAIS 461 N.W. 98TH CT. MIAMI, FL 00000 33172 VP NEVINS, FREEMAN J. 461 N.W. 98TH CT. MIAMI, FL 00000 33172 SD SANTOS, FRANCIS 461 N.W. 98TH CT. MIAMI, FL 00000 33172	ROLDON, MARIA 461 N.W. 98TH CT. MIAMI, FL 33172 DIRECTOR

14. I, the undersigned, do hereby certify that the information required with this filing is true and correct, and that the same are true and correct to the best of my knowledge and belief.

SIGNATURE X *James J. Delcalvo* 4-27-1995 225-6099 X

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

1995



DOCUMENT # 737405 (1)

GEMINI IV TOWNHOUSE ASSOCIATION, INC.

MIAMI, FLORIDA

3209 BIRD AVENUE
MIAMI FL 33133

3209 BIRD AVENUE
MIAMI FL 33133

3. Certificate of Incorporation	3a. Date of Report
12/01/1976	05/01/1994
4. Registered Agent	Applied Fee
59-1781852	Not Applicable
5. Additional Fee Required	\$8.75
6. May Be Added to Fees	\$5.00
7. Supplemental Fee Not Required	\$68.75
8. This corporation has not been organized for the purpose of conducting business in the State of Florida	

21. 3205 Bird Ave	26. 3205 Bird Ave
22. Miami FL	27. Miami FL
23. 33133	28. 33133
24. 33133	29. 33133

9. Name and Address of Current Registered Agent

PANARESE, ANTHONY J.
3209 BIRD AVENUE
MIAMI FL 33133

10. Name and Address of New Registered Agent

81. Name	85. City/County
Fred Hart	33133
82. Street Address	
3205 Bird Ave	
83. City/County	
Miami FL	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the person named in the foregoing certificate is the person who has been elected to the office of Registered Agent for the corporation named in the foregoing certificate, and that the person named in the foregoing certificate is qualified to act as such agent.

Signature

Fred Hart

April 4 1995

12. Name and Address of Current Registered Agent	13. Name and Address of New Registered Agent
PTD PANARESE, ANTHONY J. 3209 BIRD AVENUE MIAMI FL SD MCKITTERICK, RUSSELL 3217 BIRD AVENUE MIAMI FL VD TOFEL, JAIME 3201 BIRD AVENUE MIAMI FL	PTD Hart, Frederick 3205 Bird Ave Miami FL 33133 Reddick, David VD 3203 Bird Ave Miami FL 33133

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fred Hart

April 4/95

10/10/10

14

FLORIDA

7300 W MCNAB ROAD
#212
TAMARAC FL 33321

3	03/04/1977	39	04/14/1994
4	59-1776292		Admission Fee Not Required
5	Additional Fee Required		\$8.75
6	Additional Fee Not Required		\$5.00
7	Additional Fee Not Required		\$68.75
8	Additional Fee Not Required		\$68.75

21	8306 A	Colman Blvd.	26	9006 A	Colman Blvd.
22			27	H H	
23	Rompage Beach		28	Rompage Beach	FL
24	33062	USA	29	33062	USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent:

KINSLER, MARK
11009 PARK CENTRAL BLVD SO
STE 1100
POMPANO BCH FL 33064

01	Name	JAMES J. FLYNN
02	Address	826 N. OCEAN BOULEVARD #18
03		
04	City	POMPANO BEACH
05	County	FL 35003

11. The purpose of the investigation of this case is to determine whether the defendant is a person who is a member of the same family as the person who is the subject of the investigation. The purpose of the investigation is to determine whether the defendant is a person who is a member of the same family as the person who is the subject of the investigation. The purpose of the investigation is to determine whether the defendant is a person who is a member of the same family as the person who is the subject of the investigation.

9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 8

Time: 1 Hour

STD
TINTLE, JEAN
530 HENRY ST
SCOTCH PINES, N J
STD
FLYNN, JIM
820 N OCEAN BLVD 18
POMPANO BCH FL
D
WELSH, ALICE
194 COUTLAND AVE
STAMFORD CT
VPD
MOITOZA, ANITA
81 BAY ROAD
NORTON, MASS 02766
PD
CLARKE, CHARLES
820 N OCEAN BLVD #5
POMPANO BEACH FL

☒ Male ☐ Age
 FIMBLE, JEAN
 530 HENRY STREET
 SCOTCH PLAINS, NJ 07076
☐ Group ☐ Age

☒ Male ☐ Age
 WELSH, ALICE
 3 DEAN STREET, APT. 2A
 STAMFORD, CT 06902
 RFD
 AUSTON, ANITA
 81 BAY ROAD
 MONTICELLO, N.Y. 12538
☐ Group ☐ Age
 DELETT

☐ Group ☒ Age
 D/V
 KENNEDY, D. WILLIAMS
 890 N. CEDAR BLVD. H 3
 MEMPHIS, TENN. 38102

SIGNATURE:

SIGNATURE AND TYPE IN FULL OF EACH OF THE ABOVE PERSONS

345 1795 6746

00000000

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

1995

DOCUMENT # 738509

(9)

JACKSONVILLE VOLUNTEER FIREMENS ASSOCIATION, INC

JACKSONVILLE
TALLAHASSEE, FLORIDA

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------------------|--|--------------|---|--------------------------|--|----------------------|----------|------------------------|------|---------------------|--|-----------------------|------|------------------------|----------|---------------------|----------------|----------------------|------|------------------------|------|-------------------------|----------------|-----------------------|------|------------------------|------|------------------------|----------------|----------------------|------|------------------------|------|-----------------------------|----------------|----------------------|------|------------------------|--|--|--|--|------|------------------|--|----------------|--------------------------|--|------|----------------------|--|------|------------------|--|----------------|-------------------|--|------|----------------------|--|------|-------------------------------|--|
| 107 MARKET ST
JACKSONVILLE FL 32202 | | 107 MARKET ST
JACKSONVILLE FL 32202 | | 3. Date of Incorporation
03/30/1977 | | 3a. Date of Last Report
05/01/1994 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Filing Office
21 | | 2a. Mailing Address
26 | | 4. Filing Office
59-1726116 | | Applied For
☐ Not Applicable
☐ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | | 27 | | 5. Certificate of Incorporation
☐ | | \$8.75 Additional Fee Required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23 | | 28 | | 6. Certificate of Incorporation
☐ | | \$5.00 May Be Added to Fees | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 | | 29 | | 7. Nonprofit with 501(c)(3) Status
☐ | | \$68.75 Supplemental Fee Not Required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25 | | 30 | | 8. This corporation has submitted for inspection its records as required by Florida Statutes ☐ Yes ☒ No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Name and Address of Current Registered Agent

MCKELVY, DOUGLAS
107 MARKET ST.
JACKSONVILLE FL 32201 | | | | 10. Name and Address of New Registered Agent
<table border="1"> <tr> <td>81. Name</td> <td colspan="3">John Knolls</td> </tr> <tr> <td>82. Street Address (P.O. Box Number is Not Acceptable)</td> <td colspan="3">107 Market ST</td> </tr> <tr> <td>83. City</td> <td>Jacksonville</td> <td>85. Zip Code</td> <td>32201</td> </tr> </table> | | | | 81. Name | John Knolls | | | 82. Street Address (P.O. Box Number is Not Acceptable) | 107 Market ST | | | 83. City | Jacksonville | 85. Zip Code | 32201 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 81. Name | John Knolls | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 82. Street Address (P.O. Box Number is Not Acceptable) | 107 Market ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 83. City | Jacksonville | 85. Zip Code | 32201 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation exists and is authorized for the purpose of changing its registered office as herein provided for in the Florida Statutes. The above named corporation is authorized by its board of directors to execute this report as required by law. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Officer or Director
<i>John Knolls</i> | | | | Date
4-14-95 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. OFFICERS AND DIRECTORS | | | | 13. SECRETARIES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>NAME</td> <td>T SHAW, STEVEN T.</td> </tr> <tr> <td>STREET ADDRESS</td> <td>107 MARKET ST</td> </tr> <tr> <td>CITY</td> <td>JACKSONVILLE FL</td> </tr> <tr> <td>NAME</td> <td>D COSTA, ART</td> </tr> <tr> <td>STREET ADDRESS</td> <td>107 MARKET ST.</td> </tr> <tr> <td>CITY</td> <td>JACKSONVILLE FL</td> </tr> <tr> <td>NAME</td> <td>V LEE, CARL</td> </tr> <tr> <td>STREET ADDRESS</td> <td>107 MARKET ST</td> </tr> <tr> <td>CITY</td> <td>JACKSONVILLE FL</td> </tr> <tr> <td>NAME</td> <td>T SHAW, VIRGINIA</td> </tr> <tr> <td>STREET ADDRESS</td> <td>107 MARKET ST.</td> </tr> <tr> <td>CITY</td> <td>JACKSONVILLE FL</td> </tr> <tr> <td>NAME</td> <td>D GINTHER, PAUL</td> </tr> <tr> <td>STREET ADDRESS</td> <td>107 MARKET ST</td> </tr> <tr> <td>CITY</td> <td>JACKSONVILLE FL</td> </tr> <tr> <td>NAME</td> <td>DP MCKELVEY, DOUGLAS</td> </tr> <tr> <td>STREET ADDRESS</td> <td>107 MARKET ST</td> </tr> <tr> <td>CITY</td> <td>JACKSONVILLE FL</td> </tr> </table> | | | | NAME | T SHAW, STEVEN T. | STREET ADDRESS | 107 MARKET ST | CITY | JACKSONVILLE FL | NAME | D COSTA, ART | STREET ADDRESS | 107 MARKET ST. | CITY | JACKSONVILLE FL | NAME | V LEE, CARL | STREET ADDRESS | 107 MARKET ST | CITY | JACKSONVILLE FL | NAME | T SHAW, VIRGINIA | STREET ADDRESS | 107 MARKET ST. | CITY | JACKSONVILLE FL | NAME | D GINTHER, PAUL | STREET ADDRESS | 107 MARKET ST | CITY | JACKSONVILLE FL | NAME | DP MCKELVEY, DOUGLAS | STREET ADDRESS | 107 MARKET ST | CITY | JACKSONVILLE FL | <table border="1"> <tr> <td>NAME</td> <td>Secretary</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Ralph Terreaux Lt</td> <td></td> </tr> <tr> <td>CITY</td> <td>107 Market ST</td> <td></td> </tr> <tr> <td>NAME</td> <td>President</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>John Knoll</td> <td></td> </tr> <tr> <td>CITY</td> <td>107 Market ST</td> <td></td> </tr> <tr> <td>NAME</td> <td>Jacksonville, FL 32201</td> <td></td> </tr> </table> | | | | NAME | Secretary | ☒ Change ☐ Addition | STREET ADDRESS | Ralph Terreaux Lt | | CITY | 107 Market ST | | NAME | President | ☒ Change ☐ Addition | STREET ADDRESS | John Knoll | | CITY | 107 Market ST | | NAME | Jacksonville, FL 32201 | |
| NAME | T SHAW, STEVEN T. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | 107 MARKET ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | JACKSONVILLE FL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | D COSTA, ART | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | 107 MARKET ST. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | JACKSONVILLE FL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | V LEE, CARL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | 107 MARKET ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | JACKSONVILLE FL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | T SHAW, VIRGINIA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | 107 MARKET ST. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | JACKSONVILLE FL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | D GINTHER, PAUL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | 107 MARKET ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | JACKSONVILLE FL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | DP MCKELVEY, DOUGLAS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | 107 MARKET ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | JACKSONVILLE FL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | Secretary | ☒ Change ☐ Addition | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | Ralph Terreaux Lt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | 107 Market ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | President | ☒ Change ☐ Addition | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS | John Knoll | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY | 107 Market ST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | Jacksonville, FL 32201 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR