FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **754665** **(8)**

1. Corporation Name
CENTRAL PARK ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3300 PHILLIPS HIGHWAY JACKSONVILLE FL 32207	~~3300 PHILLIPS HIGHWAY~~ ~~JACKSONVILLE FL 32207~~

2. Principal Place of Business 21	2a. Mailing Address 26 P.O. Box 5369
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Jacksonville, FL.
Zip / Country 24 / 25	Zip / Country 29 32247 / 30 Duval

3. Date Incorporated or Qualified 10/16/1980	3a. Date of Last Report 05/01/1995
4. FEI Number 59-3070077	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

MCGEHEE, THOMAS R
3300 PHILLIPS HWY
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	MCGEHEE, FRANK S		12 NAME		
STREET ADDRESS	3300 PHILLIPS HWY		13 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		14 CITY-ST-ZIP		
TITLE	DC	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	MCGEHEE, THOMAS R		22 NAME		
STREET ADDRESS	3300 PHILLIPS HWY		23 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		24 CITY-ST-ZIP		
TITLE	TAS	☒ DELETE	31 TITLE	T A S	☐ Change ☒ Addition
NAME	DUPREE, J. W., JR.		32 NAME	Jonathan Y. Rogers	
STREET ADDRESS	3300 PHILLIPS HWY		33 STREET ADDRESS	3300 Philips Hwy	
CITY-ST-ZIP	JACKSONVILLE FL		34 CITY-ST-ZIP	Jacksonville, FL. 32207	
TITLE	S	☐ DELETE	41 TITLE	000001873680	☐ Change ☐ Addition
NAME	MCGEHEE, T.R., JR.		42 NAME	-06/24/96--01054--026	
STREET ADDRESS	3300 PHILLIPS HWY		43 STREET ADDRESS	***61.25	
CITY-ST-ZIP	JACKSONVILLE FL		44 CITY-ST-ZIP		
TITLE	V	☐ DELETE	51 TITLE		☒ Change ☐ Addition
NAME	~~MCGEHEE, F.S., JR.~~		52 NAME	F. Sutton McGehee, Jr.	
STREET ADDRESS	3300 PHILLIPS HWY		53 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE	C F O	☐ Change ☒ Addition
NAME			62 NAME	John Brent	
STREET ADDRESS			63 STREET ADDRESS	3300 Philips Hwy	
CITY-ST-ZIP			64 CITY-ST-ZIP	Jacksonville, FL. 32207	

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sutton McGehee 4/25/96 (904) 348-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

F. Sutton McGehee, Jr. Vice President