2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#714162

Entity Name: URBAN JACKSONVILLE, INC.

FILED Apr 21, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
•				4250 LAKESIDE DR			
4250 LAKESIDE DR 204				300 LAKESIDE DR 300			
JACKSONVILLE, FL 32210				JACKSONVILLE, FL 32210			
Current Mailing Address:				New Mailing Address:			
4250 LAKESIDE DR 204				4250 LAKESIDE DR 300			
JACKSONVILLE, FL 32210				JACKSONVILLE, FL 32210			
FEI Number:	: 23-7024899	FEI Number Applied For ()	FEI Num	nber Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:		Name and	Address	of New Registered Agent:	
2065 HER	JSER, ERIC J. SCHEL STRE IVILLE, FL 322						
	named entity e of Florida.	submits this statement for the p	ourpose of	f changing i	its registere	ed office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent			 ∍nt	Date			
OFFICERS	S AND DIREC	TORS:		ADDITION	IS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD (SEFTON, JOHN 200 LAURA ST JACKSONVILL	REET		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VC (HARRISON, EE 256EAST CHUI JACKSONVILL	RCH STREET		Title: Name: Address: City-St-Zip:	256 EAST	(X) Change()Addition I, EDWARD H CHURCH STREET /ILLE, FL 32202	
Title: Name: Address: City-St-Zip:	D (JACKSON, VIN 4902 ARROWS JACKSONVILL	SMITH ROAD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (RICHARDSON, 4631 ALCONQ JACKSONVILL	UIN AVE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GILBREATH, D 218 ASHLEY S JACKSONVILL	Т		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MERCIER, LEE	TH ST STE 1100		Title: Name: Address: City-St-Zip:		() Change () Addition	

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: JOHN T SEFTON CD 04/21/2004

JONATHAN R. MACEDO, CFO, EVP 4250 LAKESIDE DRIVE, SUITE 300 JACKSONVILLE, FL 32210

THERESA M. BERTRAM, CEO 4250 LAKESIDE DRIVE, SUITE 300 JACKSONVILLE, FL 32210