

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747440

FILED
Apr 04, 2011
Secretary of State

Entity Name: FIREFIGHTERS FRINGE BENEFITS OF JACKSONVILLE, INC.

Current Principal Place of Business:

625 STOCKTON STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

625 STOCKTON STREET
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEIDES, MOSES
817 NORTH MAIN ST
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: STD
Name: CROFT, JAMES P JR
Address: 6851 MCMULLIN STREET
City-St-Zip: JACKSONVILLE, FL 32210

Title: PD
Name: WYSE, RANDALL W
Address: 1450 CRYSTAL SANDS DR
City-St-Zip: JACKSONVILLE, FL 32226

Title: D
Name: OSBORNE, LARRY
Address: 8743 RICARDO LA
City-St-Zip: JACKSONVILLE, FL 32216

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: JAMES P. CROFT, JR.

STD

04/04/2011

Electronic Signature of Signing Officer or Director

Date