2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701313

Entity Name: ROTARY CLUB OF JACKSONVILLE, FLORIDA, INC.

FILED Apr 09, 2020 Secretary of State 1239236542CC

Current Principal Place of Business:

12020 WINSTEAD RD JACKSONVILLE. FL 32220

Current Mailing Address:

PO BOX 37028

JACKSONVILLE. FL 32236 US

FEI Number: 59-0428460 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OHMER, CHERRI COOMBS EXECUTIVE DIRECTOR 12020 WINSTEAD RD JACKSONVILLE, FL 32220 US

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: CHERRI COOMBS OHMER 04/09/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title ED

Name LAMEY, JULIE Name OHMER, CHERRI C

Address 4175 LAKESIDE DRIVE Address 12020 WINSTEAD ROAD

City-State-Zip: JACKSONVILLE FL 32210 City-State-Zip: JACKSONVILLE FL 32220

Title PRESIDENT Title OFFICER

Name BRYAN, THOMAS A Name JENKS, TRACI

Address 4495-304 ROOSEVELT BLVD Address 121 W. FORSYTH STREET

SUITE 321 SUITE 900

City-State-Zip: JACKSONVILLE FL 32210 City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY Title OFFICER

Name GNAGE, MARIE Name KELLEY, GERALD P JR.

Address 501 WEST STATE STREET Address 2913 WESTSIDE BLVD

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32209

Title OFFICER

Name SORENSON, WILLIAM

Address 4417 BEACH BLVD

SUITE 302

City-State-Zip: JACKSONVILLE FL 32207

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: CHERRI COOMBS OHMER ED 04/09/2020

Electronic Signature of Signing Officer/Director Detail

Date