

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708127

Entity Name: MUSEUM OF SCIENCE AND HISTORY OF JACKSONVILLE, INC.

Current Principal Place of Business:

1025 MUSEUM CIRCLE
JACKSONVILLE, FL 32207

Current Mailing Address:

1025 MUSEUM CIRCLE
JACKSONVILLE, FL 32207

FEI Number: 59-0651090

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KUHR, MICHAEL S
1025 MUSEUM CIRCLE
JACKSONVILLE, FL 32207 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: MICHAEL S. KUHR

07/10/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXD
Name HANE, MARIA EX DIR
Address 1025 MUSEUM CIRCLE
City-State-Zip: JACKSONVILLE FL 32207

Title SECRETARY
Name HANE, MARIA
Address 1025 MUSEUM CIRCLE
City-State-Zip: JACKSONVILLE FL 32207

Title TREASURER
Name ALEX, GRAHAM
Address 1025 MUSEUM CIRCLE
City-State-Zip: JACKSONVILLE FL 32207

Title CHAIR
Name STEP NOSKI, JIM
Address ONE INDEPENDENT DRIVE, SUITE 1000
City-State-Zip: JACKSONVILLE FL 32202

Title VICE CHAIR
Name WARE, DABNEY
Address 1025 MUSEUM CIRCLE
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: MARIA HANE

SECRETARY

07/10/2015

Electronic Signature of Signing Officer/Director Detail

Date