Electronic Signature of Signing Officer/Director Detail

8464 BEACH BLVD. JACKSONVILLE, FL 32216 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:

DEISLER, DENISE

Title	PRESIDENT/CEO	Title	CHAIRMAN
Name	DEISLER, DENISE	Name	EVERLY, LIS'E
Address	8464 BEACH BLVD.	Address	1901 1ST ST NORTH #1301
City-State-Zip:	JACKSONVILLE FL 32216	City-State-Zip:	JACKSONVILLE FL 32250
Title	VC	Title	
Name	LUECK, SEAN	Name	MEEKS, GARY
Address	2809 CHRISTOPHER CREEK RD. N.	Address	24724 HARBOUR VIEW DR.
City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	PONTE VEDRA BEACH FL 32082
Title Name	BOARD MEMBER EMERITUS STEIN LINDA	Title Name	SECRETARY ANDERSON, CICI
Title Name Address	BOARD MEMBER EMERITUS STEIN, LINDA 6750 EPPING FOREST WAY NORTH #116	Name Address	ANDERSON, CICI 105 SEA LILY LANE
Name	STEIN, LINDA 6750 EPPING FOREST WAY NORTH #116	Name	ANDERSON, CICI 105 SEA LILY LANE
Name Address City-State-Zip:	STEIN, LINDA 6750 EPPING FOREST WAY NORTH #116 JACKSONVILLE FL 32216	Name Address	ANDERSON, CICI 105 SEA LILY LANE
Name Address	STEIN, LINDA 6750 EPPING FOREST WAY NORTH #116	Name Address City-State-Zip:	ANDERSON, CICI 105 SEA LILY LANE PONTE VEDRA BEACH FL 32082
Name Address City-State-Zip:	STEIN, LINDA 6750 EPPING FOREST WAY NORTH #116 JACKSONVILLE FL 32216	Name Address City-State-Zip: Title	ANDERSON, CICI 105 SEA LILY LANE PONTE VEDRA BEACH FL 32082 OFFICER
Name Address City-State-Zip: Title	STEIN, LINDA 6750 EPPING FOREST WAY NORTH #116 JACKSONVILLE FL 32216 TREASURER	Name Address City-State-Zip: Title Name	ANDERSON, CICI 105 SEA LILY LANE PONTE VEDRA BEACH FL 32082 OFFICER MUNAGO, MARC 5555 GATE PARKWAY STE 100

Officer/Director Detail :

Continues on page 2

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: LAUREN JACKOWIEC

CHIEF OPERATING OFFICER

02/02/2024

Date

FILED Feb 02, 2024 Secretary of State 2324811309CC

Certificate of Status Desired: No

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711688

Entity Name: JACKSONVILLE HUMANE SOCIETY, INC.

Current Principal Place of Business:

8464 BEACH BOULEVARD JACKSONVILLE, FL 32216

Current Mailing Address:

8464 BEACH BOULEVARD JACKSONVILLE, FL 32216

FEI Number: 59-0624410

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

Date

Officer/Director Detail Continued :

Title	OFFICER	Title	OFFICER
Name	SONG, SUSAN	Name	VOELKER, JAY
Address	303 VALLEY GROVE DR	Address	147 SALIFISH DRIVE
City-State-Zip:	PONTE VEDRA FL 32081	City-State-Zip:	PONTE VEDRA BEACH FL 32082
Title	PRESIDENT	Title	COO
Title Name	PRESIDENT NICOLAS, LAWRENCE	Title Name	COO JACKOWIEC, LAUREN
Name	NICOLAS, LAWRENCE	Name	JACKOWIEC, LAUREN