

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725470

Entity Name: AMIKIDS JACKSONVILLE, INC.**Current Principal Place of Business:**AMIKIDS JACKSONVILLE, INC.
13375 BEACH BOULEVARD
JACKSONVILLE, FL 32246**Current Mailing Address:**AMIKIDS, INC.
5915 BENJAMIN CENTER DRIVE
TAMPA, FL 33634**FEI Number:** 59-1447527**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HULL, DAVID J
SMITH, HULSEY & BUSEY
ONE INDEPENDENT DRIVE SUITE 3300
JACKSONVILLE, FL 32202 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name HULL, DAVID
Address 225 WATER STREET, STE 1800
City-State-Zip: JACKSONVILLE FL 32202

Title D
Name THORNTON, MICHAEL
Address 5915 BENJAMIN CENTER DRIVE
City-State-Zip: TAMPA FL 33634

Title D
Name LEARCH, ALAN
Address AMIKIDS JACKSONVILLE, INC.
13375 BEACH BOULEVARD
City-State-Zip: JACKSONVILLE FL 32246

Title S
Name MANNERS, KATEENA E.
Address 225 WATER STREET
STE. 1800
City-State-Zip: JACKSONVILLE FL 32202

Title D
Name O'BRIEN-GADD, STEPHANIE
Address AMIKIDS JACKSONVILLE, INC.
13375 BEACH BOULEVARD
City-State-Zip: JACKSONVILLE FL 32246

Title D
Name PROCTOR, JULIE
Address 13375 BEACH BLVD.
City-State-Zip: JACKSONVILLE FL 32246

Title D
Name CRABTREE, JOHN
Address 13375 BEACH BLVD.
City-State-Zip: JACKSONVILLE FL 32246

Title C
Name JONES, RYAN
Address AMIKIDS JACKSONVILLE, INC.
13375 BEACH BOULEVARD
City-State-Zip: JACKSONVILLE FL 32246

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: MICHAEL THORNTON**DIRECTOR****05/01/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	T
Name	MOORE, REBECCA
Address	AMIKIDS JACKSONVILLE, INC. 13375 BEACH BOULEVARD
City-State-Zip:	JACKSONVILLE FL 32246