

2022 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 JACKSONVILLE, INC.
13375 BEACH BOULEVARD
JACKSONVILLE, FL 32246 US**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 13375 BEACH BOULEVARD
City-State-Zip: JACKSONVILLE FL 32246

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

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

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

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

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

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

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

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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 A. THORNTON**DIRECTOR****05/01/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D
Name	CHARICE , LEE
Address	13375 BEACH BOULEVARD
City-State-Zip:	JACKSONVILLE FL 32246