

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738988

Entity Name: GARDEN CLUB OF JACKSONVILLE, INCORPORATED**Current Principal Place of Business:**1005 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204**Current Mailing Address:**1005 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204**FEI Number:** 59-0520717**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCGINNIS, BARBARA PRESIDENT
1005 RIVERSIDE AVE
JACKSONVILLE, FL 32204 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:** BARBARA MCGINNIS

01/14/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MCGINNIS, BARBARA J
Address 7245 HOLIDAY RD S
City-State-Zip: JACKSONVILLE FL 32216

Title VP
Name CAVEN, SUSAN
Address 2775 WHITE OAK LANE
City-State-Zip: JACKSONVILLE FL 32207

Title VP2
Name CHAMBERLAIN, JANET
Address 7624 HOLIDAY RD. S
City-State-Zip: JACKSONVILLE FL 32216

Title ASSISTANT TREASURER
Name CHOPSKIE, NAN
Address 7834 HUNTERS GROVE RD.
City-State-Zip: JACKSONVILLE FL 32225

Title TREASURER
Name SAUER, ANN
Address 1667 JORK RD.
City-State-Zip: ORANGE PARK FL 32207

Title TRUSTEE
Name KIRBY, VIRGINIA
Address 4401 LAKESIDE DR.
#202
City-State-Zip: JACKSONVILLE FL 32210

Title TRUSTEE
Name WOODWORTH, IRENE
Address 12894 LA COSTA CT.
City-State-Zip: JACKSONVILLE FL 32225

Title TRUSTEE
Name BYRD, DEBBIE
Address 5340 SHORECREST DR.
City-State-Zip: JACKSONVILLE FL 32210

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: BARBARA J MCGINNIS

PRESIDENT

01/14/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CORRESPONDING SECRETARY
Name NEWMAN, JENNIFER DEBORAH
Address 2254 MILLER OAKS DR. N
City-State-Zip: JACKSONVILLE FL 32217

Title SECRETARY
Name LONG, CONNIE
Address 319 LEGACY DR.
City-State-Zip: ORANGE PARK FL 32073

Title TRUSTEE
Name OWENS, BROOK
Address 4180 JULINGTON CREEK DR.
City-State-Zip: JACKSONVILLE FL 32223