2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2019
Secretary of State
8737891753CC

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 05/03/2019

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

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

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

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

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

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

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

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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: BARBARA J MCGINNIS PRESIDENT 05/03/2019

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