2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003277

Entity Name: JACKSONVILLE CIVIC COUNCIL, INC.

FILED Mar 05, 2015 Secretary of State CC9794290769

Current Principal Place of Business:

800 WEST MONROE STREET JACKSONVILLE, FL 32202

Current Mailing Address:

800 WEST MONROE STREET JACKSONVILLE, FL 32202 US

FEI Number: 59-3485919 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, JEANNE M 800 WEST MONROE STREET 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: JEANNE M. MILLER 03/05/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

HALVERSON, STEVEN T Name Name GLOVER, NATHANIEL

111 RIVERSIDE AVENUE Address Address 1658 KINGS ROAD, SUITE 200

City-State-Zip: JACKSONVILLE FL 32209 JACKSONVILLE FL 32202 City-State-Zip:

DIRECTOR Title Title DIRECTOR

NEWTON, RUSTY Name DELANEY, JOHN Name

Address 200 WEST FORSYTH STREET Address 1 UNF DRIVE

Title

SUITE 1600

DIRECTOR

JACKSONVILLE FL 32224 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32202

Title **DIRECTOR**

Name STEIN, MARTIN JR. Name APPLEBY, CHARLES ONE INDEPENDENT DRIVE Address

Address 90 FORT WADE ROAD **SUITE 114**

City-State-Zip: PONTE VEDRA FL 32081 City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR **DIRECTOR** Title

Name WILES, SUSAN Name EDELMAN, DANIEL Address P.O. BOX 2351 Address

245 RIVERSIDE AVENUE SUITE 410

PONTE VEDRA FL 32004 City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip:

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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.

03/05/2015 SIGNATURE: EDWARD E. BURR **CHAIRMAN**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title CHAIRMAN

Name BURR, EDWARD E

Address 7807 BAYMEADOWS ROAD EAST

SUITE 205

City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR

Name TOWNSEND, RONALD
Address 13440 ELLSWORTH LANE
City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR

Name FRANKLIN, FRED

Address 1301 RIVERPLACE BOULEVARD

SUITE 1500

City-State-Zip: JACKSONVILLE FL 32207