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.

TD

SIGNATURE: LUCIAN D LAWLEY

Electronic Signature of Signing Officer/Director Detail

Entity	Name: JA	CKSONVIL	LE REEF	RESEARCH	TEAM, INC.
-					

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

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1655 THE GREEN'S WAY #3422 JACKSONVILLE, FL 32250

DOCUMENT# N17217

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Current Mailing Address:

1655 THE GREEN'S WAY #3422 JACKSONVILLE, FL 32250 US

FEI Number: 59-2889442

Officer/Director Detail :

SECRETARY

DACEY JUSTINA

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

NELSEN, JAMES D 8558 ROYAL LAKES DRIVE JACKSONVILLE, FL 32256-8455 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:

Title

Namo

Name	DAGET, JUSTINA	Name	WILCOX, SOL
Address	1655 THE GREEN'S WAY #3422	Address	1655 THE GREEN'S WAY #3422
City-State-Zip:	JACKSONVILLE FL 32250	City-State-Zip:	JACKSONVILLE FL 32250
Title	VPD	Title	TD
Name	PERKNER, JOHN M	Name	LAWLEY, LUCIAN
Address	1655 THE GREEN'S WAY #3422	Address	3144 BYRON ROAD
City-State-Zip:	JACKSONVILLE FL 32250	City-State-Zip:	GREEN COVE SPRING FL 32043

Title

Namo

PD

WILCOX SUE

Certificate of Status Desired: No

02/08/2019

FILED Feb 08, 2019 Secretary of State 6636812265CC

Date

Date