

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17217

Entity Name: JACKSONVILLE REEF RESEARCH TEAM, INC.**Current Principal Place of Business:**1655 THE GREEN'S WAY #3422
JACKSONVILLE, FL 32250**Current Mailing Address:**1655 THE GREEN'S WAY #3422
JACKSONVILLE, FL 32250 US**FEI Number:** 59-2889442**Certificate of Status Desired:** No**Name and Address of Current 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	PERKNER, JOHN
Address	36 JACKSON AVENUE
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	PD
Name	WILCOX, SUE
Address	1655 THE GREEN'S WAY #3422
City-State-Zip:	JACKSONVILLE FL 32250

Title	TD
Name	LINDHOLM, BILL
Address	8181 SUTTON PLACE NORTH
City-State-Zip:	JACKSONVILLE FL 32217

Title	D
Name	DAVIS, JAMES
Address	100 CONCH CT
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	VPD
Name	GUNSOLUS, GENNY
Address	3129 CORAL REEF DR
City-State-Zip:	JACKSONVILLE FL 32224

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: BILL LINDHOLM**TREASURER****03/24/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date