

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000011884

**Entity Name:** JEB JACKSONVILLE SUPPORT CORPORATION

**Current Principal Place of Business:**

2043 FOREST STREET  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

2043 FOREST STREET  
JACKSONVILLE, FL 32204 US

**FEI Number:** 84-3727938

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOYT, LINDSAY  
2043 FOREST STREET  
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:** LINDSAY HOYT

02/07/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name ROOD, JOHN D.  
Address 2043 FOREST STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR  
Name DEFOOR, ALLISON  
Address 2043 FOREST STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title VC  
Name ALLEN , LEN  
Address 2043 FOREST STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title SECRETARY, TREASURER  
Name GOTTLIEB, DARYL  
Address 2043 FOREST STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR  
Name DAVIS, SHANTEL  
Address 2043 FOREST STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR  
Name DUGGER, REBECCA  
Address 2043 FOREST STREET  
City-State-Zip: JACKSONVILLE FL 32204

*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:** JOHN ROOD

CHAIRMAN

02/07/2024

Electronic Signature of Signing Officer/Director Detail

Date