

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

DOCUMENT# N22000003450

**Entity Name:** TOGETHER JAX, INC.

**Current Principal Place of Business:**

11808 WORDSWORTH CT  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

PO BOX 23383  
JACKSONVILLE, FL 32241 US

**FEI Number: 88-1711996**

**Certificate of Status Desired: Yes**

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

BONNIE, HENDRIX F  
11808 WORDSWORTH CT  
JACKSONVILLE, FL 32223 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 P,D  
Name HENDRIX, BONNIE F  
Address 11808 WORDSWORTH CT  
City-State-Zip: JACKSONVILLE FL 32223

Title VP, D  
Name RANSOME, JESSICA  
Address 9037 DEVON PINES DR  
City-State-Zip: JACKSONVILLE FL 32211

Title D  
Name LYONS, MARY H  
Address 11808 WORDSWORTH CT  
City-State-Zip: JACKSONVILLE FL 32223

*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: BONNIE FAYE HENDRIX**

**PRESIDENT**

**01/15/2024**

Electronic Signature of Signing Officer/Director Detail

Date