 gning Officer/Director Deta

## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41211

Entity Name: JAX TRANSIT MANAGEMENT CORP.

# **Current Principal Place of Business:**

121 WEST FORSYTH STREET, SUITE 200 JACKSONVILLE, FL 32202

# **Current Mailing Address:**

121 WEST FORSYTH STREET, SUITE 200 JACKSONVILLE, FL 32202 US

### FEI Number: 59-3041602

# Name and Address of Current Registered Agent:

FERGUSON, CLEVELAND 121 WEST FORSYTH STREET, SUITE 200 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:	CLEVELAND FERGUSON III		04/22/2016
	Electronic Signature of Registered Agent		Date
Officer/Direct	or Detail :		
T:41a		T:41 a	

Title	PRESIDENT	Title	VICE PRESIDENT OF MAINTENANCE
Name	DARNALL, LISA	Name	BENSTON, MARK
Address	100 N. MYRTLE AVE.	Address	100 N. MYRTLE AVE.
City-State-Zip:	JACKSONVILLE FL 32204-1310	City-State-Zip:	JACKSONVILLE FL 32204-1310
Title	SECRETARY, TREASURER	Title	CHAIRMAN, DIRECTOR
Name	BREWER, RANDY	Name	FORD, NATHANIEL P
Address	100 N. MYRTLE AVE.	Address	121 WEST FORSYTH STREET, SUITE 200
City-State-Zip:	JACKSONVILLE FL 32204-1310	City-State-Zip:	JACKSONVILLE FL 32202
Title	DIRECTOR	Title	DIRECTOR
Name	FERGUSON, CLEVELAND	Name	LI, HENRY
Address	121 WEST FORSYTH STREET, SUITE 200	Address	121 WEST FORSYTH STREET, SUITE 200
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	
Title	DIRECTOR	Title	VICE PRESIDENT OF FIXED ROUTE
Name	GIBBS, JACQUIE	Name	MOTTL, KATHLEEN
Address	121 WEST FORSYTH STREET, SUITE 200	Address	100 N. MYRTLE AVE.
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32204-1310

#### Continues on page 2

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: CLEVELAND FERGUSON III

VICE PRESIDENT OF 04 ADMINISTRATION

04/22/2016

FILED Apr 22, 2016 Secretary of State CC4942489973

Certificate of Status Desired: No

Date

#### **Officer/Director Detail Continued :**

Title	VICE PRESIDENT OF SKYWAY
Name	SAMMS, HAROLD
Address	100 N. MYRTLE AVE.
City-State-Zip:	JACKSONVILLE FL 32204-1310
Title	VICE PRESIDENT OF FIXED ROUTE
Name	GREENE, KEVIN
Address	100 NORTH MYRTLE AVENUE
City-State-Zip:	JACKSONVILLE FL 32204
Title	VICE PRESIDENT OF FIXED ROUTE
Name	POCERNIK, DAREN
Address	100 NORTH MYRTLE AVENUE
City-State-Zip:	JACKSONVILLE FL 32204

Title	VICE PRESIDENT OF FIXED ROUTE
Name	COOKSEY, LENNY
Address	100 N. MYRTLE AVENUE
City-State-Zip:	JACKSONVILLE FL 32204
Title	VICE PRESIDENT OF FIXED ROUTE
Title Name	VICE PRESIDENT OF FIXED ROUTE ZENE, CARL