2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41211

Entity Name: JAX TRANSIT MANAGEMENT CORP.

FILED
Mar 29, 2019
Secretary of State
8040109912CC

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 Certificate of Status Desired: Yes

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 03/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title CHAIRMAN, DIRECTOR Title DIRECTOR

Name FORD, NATHANIEL P Name FERGUSON, CLEVELAND III

Address 121 WEST FORSYTH STREET, SUITE Address 121 WEST FORSYTH STREET, SUITE

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

Title PRESIDENT Title TREASURER

NameDARNALL, LISANameCOOKSEY, WALTER LENNYAddress100 NORTH MYRTLE AVENUEAddress100 NORTH MYRTLE AVENUECity-State-Zip:JACKSONVILLE FL 32204-1310City-State-Zip:JACKSONVILLE FL 32204-1310

Title SECRETARY Title VICE PRESIDENT OF FIXED ROUTE

Name BREWER, RANDY Name ROTHWELL, SHERMAN

Address 100 NORTH MYRTLE AVENUE Address 100 NORTH MYRTLE AVENUE

City-State-Zip: JACKSONVILLE FL 32204-1310 City-State-Zip: JACKSONVILLE FL 32204-1310

Title VICE PRESIDENT OF MAINTENANCE Title VICE PRESIDENT OF SKYWAY

Name BENSTON, MARK Name SAMMS, HAROLD

Address 100 NORTH MYRTLE AVENUE Address 100 NORTH MYRTLE AVENUE

City-State-Zip: JACKSONVILLE FL 32204-1310

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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

03/29/2019

Officer/Director Detail Continued:

Title DIRECTOR
Name HAYES, GREG

Address 121 WEST FORSYTH STREET, SUITE 200

City-State-Zip: JACKSONVILLE FL 32202