

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41211

Entity Name: JAX TRANSIT MANAGEMENT CORP.

Current Principal Place of Business:

100 LAVILLA CENTER DRIVE
JACKSONVILLE, FL 32204

Current Mailing Address:

100 LAVILLA CENTER DRIVE
JACKSONVILLE, FL 32204 US

FEI Number: 59-3041602

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FERGUSON, CLEVELAND
100 LAVILLA CENTER DRIVE
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: CLEVELAND FERGUSON III

05/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, DIRECTOR
Name FORD, NATHANIEL P
Address 100 LAVILLA CENTER DRIVE
City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR
Name FERGUSON, CLEVELAND III
Address 100 LAVILLA CENTER DRIVE
City-State-Zip: JACKSONVILLE FL 32204

Title PRESIDENT, SECRETARY
Name TODD, BONNIE
Address 100 NORTH MYRTLE AVENUE
City-State-Zip: JACKSONVILLE FL 32204-1310

Title VICE PRESIDENT OF FIXED ROUTE
Name BROWN, ANGELA
Address 100 NORTH MYRTLE AVENUE
City-State-Zip: JACKSONVILLE FL 32204-1310

Title TREASURER
Name ROTHWELL, SHERMAN
Address 100 NORTH MYRTLE AVENUE
City-State-Zip: JACKSONVILLE FL 32204-1310

Title VICE PRESIDENT OF MAINTENANCE
Name BENSTON, MARK
Address 100 NORTH MYRTLE AVENUE
City-State-Zip: JACKSONVILLE FL 32204-1310

Title VICE PRESIDENT OF SKYWAY
Name SAMMS, HAROLD
Address 100 NORTH MYRTLE AVENUE
City-State-Zip: JACKSONVILLE FL 32204-1310

Title DIRECTOR
Name HAYES, GREG
Address 100 LAVILLA CENTER DRIVE
City-State-Zip: JACKSONVILLE FL 32204

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

DIRECTOR

05/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name O'LEARY, KELLI
Address 100 LAVILLA CENTER DRIVE
City-State-Zip: JACKSONVILLE FL 32204