

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005339

Entity Name: JACK AND BETTY DEMETREE FAMILY FOUNDATION, INC.

FILED
Apr 29, 2013
Secretary of State
CC8721870004

Current Principal Place of Business:

C/O ELISA A. DEMETREE
1551 ATLANTIC BLVD SUITE 300
JACKSONVILLE, FL 32207

Current Mailing Address:

C/O ELISA A. DEMETREE
1551 ATLANTIC BLVD SUITE 300
JACKSONVILLE, FL 32207

FEI Number: 59-3407379

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEMETREE, ELISA A
1551 ATLANTIC BLVD SUITE 300
JACKSONVILLE, FL 32207 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 D
Name DEMETREE, JACK C
Address 1551 ATLANTIC BLVD SUITE 300
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name DEMETREE, BETTY A
Address 1551 ATLANTIC BLVD SUITE 300
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name DEMETREE, MARK C
Address 1551 ATLANTIC BLVD SUITE 300
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name DEMETREE, JACK CJR
Address 1551 ATLANTIC BLVD SUITE 300
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name DEMETREE, ELISA A
Address 1551 ATLANTIC BLVD SUITE 300
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name DOHERTY, LESLIE D
Address 1551 ATLANTIC BLVD SUITE 300
City-State-Zip: JACKSONVILLE FL 32207

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: JACK C DEMETREE

D

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date