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Apr 18 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 702860 (8)  
1. Corporation Name  
FEDERATED GARDEN CIRCLES, INC. OF JACKSONVILLE,  
FLORIDA



Principal Place of Business Mailing Address  
1463 MCCONNIE ST. JACKSONVILLE FL 32209  
1463 MCCONNIE ST. JACKSONVILLE FL 32209-6261

3. Date Incorporated or Qualified 08/06/1961 3a. Date of Last Report 03/22/1996  
4. FEI Number 51-0182665 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
LOCKWOOD, THERESA B.  
1444 W. 13TH ST.  
JACKSONVILLE FL 32209

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS  
TITLE PD ALEXANDER, NEALY ☒ DELETE  
NAME  
STREET ADDRESS 4200 CARROLL DR  
CITY - ST - ZIP JACKSONVILLE FL  
TITLE VD HOWARD, HAZEL ☒ DELETE  
NAME  
STREET ADDRESS 1238 W. 12TH STREET  
CITY - ST - ZIP JACKSONVILLE FL  
TITLE SD MCINTOSH, CARLOTTA ☒ DELETE  
NAME  
STREET ADDRESS 7051 ALAN AVE  
CITY - ST - ZIP JACKSONVILLE FL  
TITLE TD FORD, ADDIE ☒ DELETE  
NAME  
STREET ADDRESS 4298 FRANCIS RD  
CITY - ST - ZIP JACKSONVILLE FL  
TITLE M FORD, ADDIE ☒ DELETE  
NAME  
STREET ADDRESS 4298 FRANCIS RD  
CITY - ST - ZIP JACKSONVILLE FL  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE PD CARLOTTA T. MCINTOSH ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 7051 ALAN AVE  
1.4 CITY - ST - ZIP JACKSONVILLE, FL 32208  
2.1 TITLE VD BARBARA GARY ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 8329 EARL CIRCLE WEST  
2.4 CITY - ST - ZIP JACKSONVILLE, FL 32219  
3.1 TITLE SD MARJORIE NEAL ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 2481 W. 23RD ST  
3.4 CITY - ST - ZIP JACKSONVILLE, FL 32209  
4.1 TITLE TD JEWEL T. HOLLOWAY ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS 6189 SPIRA ST  
4.4 CITY - ST - ZIP JACKSONVILLE, FL 32209  
5.1 TITLE M CARLOTTA T. MCINTOSH ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS 7051 ALAN AVE  
5.4 CITY - ST - ZIP JACKSONVILLE, FL 32208  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CARLOTTA T. MCINTOSH *CarloTTa T. McIntosh* 4-11-97 904 764-2224  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #0008185

CR2E037 (9/96)