

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # 704444 (9)

1. Corporation Name

THE CATHEDRAL FOUNDATION OF JACKSONVILLE, INC.

Principal Place of Business

Mailing Address

**256 EAST CHURCH STREET
JACKSONVILLE FL 32202**

**256 EAST CHURCH STREET
JACKSONVILLE FL 32202**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/22/1962

3a. Date of Last Report

01/28/1994

4. FEI Number

59-6161532

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**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

**\$68.75 Supplemental
Fee Not Required**

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.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HOLSHOUSER, ERIC J.
2085 HERSCHEL STREET
JACKSONVILLE FL 32204**

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 607.0502 and 607.1508, 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 607.0505, 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **DALE, HOWARD**
STREET ADDRESS **200 WEST FORSYTH ST, SUITE 1100**
CITY - ST - ZIP **JACKSONVILLE FL**

1.1 TITLE **S** ☒ Change ☐ Addition
1.2 NAME **DAME, JILL L.**
1.3 STREET ADDRESS **2905 GRAND AVENUE**
1.4 CITY - ST - ZIP **JACKSONVILLE, FL 32210**

TITLE **D**
NAME **MARTIN, WILLIAM S. JR.**
STREET ADDRESS **501 WEST STATE STREET**
CITY - ST - ZIP **JACKSONVILLE FL**

2.1 TITLE **D** ☒ Change ☐ Addition
2.2 NAME **MCCLUNG, ROGER L.**
2.3 STREET ADDRESS **13 SOLANA ROAD**
2.4 CITY - ST - ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **S**
NAME **SEFTON JOHN T.**
STREET ADDRESS **200 LAURA STREET**
CITY - ST - ZIP **JACKSONVILLE FL**

3.1 TITLE **P** ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **TP**
NAME **MILTON GLENN**
STREET ADDRESS **4000 ST. JOHN'S AVE. #13C**
CITY - ST - ZIP **JACKSONVILLE FL**

4.1 TITLE **T** ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **D**
NAME **JACKSON, VINCENT V**
STREET ADDRESS **4802 ARROWSMITH ROAD**
CITY - ST - ZIP **JACKSONVILLE FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE **C**
NAME **WELTSEK, GUSTAVE J JR.**
STREET ADDRESS **256 EAST CHURCH ST.**
CITY - ST - ZIP **JACKSONVILLE FL**

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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, as the case may be, or on an attachment with an address.

SIGNATURE:

Gustave J. Weltsek Jr.
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER, DIRECTOR
GUSTAVE J. WELTSEK, JR., CHAIRMAN OF THE BOARD

(904) 798-5339