# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 24, 2008**
**Secretary of State**

DOCUMENT# 704444

**Entity Name:** CATHEDRAL FOUNDATION OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

4250 LAKESIDE DR
300
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4250 LAKESIDE DR
300
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number: 59-6161532** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOLSHOUSER, ERIC J.
800 WEST MONROE STREET
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | D | ( ) Delete |
| Name: | ANDERSON, JOHN Q | |
| Address: | 2309 JOSE CIRCLE NORTH | |
| City-St-Zip: | JACKSONVILLE, FL 32217 | |
| Title: | D | ( ) Delete |
| Name: | BERG, REBECCA | |
| Address: | 4811 BEACH BOULEVARD, SUITE 200 | |
| City-St-Zip: | JACKSONVILLE, FL 32207 | |
| Title: | D | ( ) Delete |
| Name: | RICHARDSON, CATHERINE | |
| Address: | 4631 ALGONQUIN AVE | |
| City-St-Zip: | JACKSONVILLE, FL 32210 | |
| Title: | CD | ( ) Delete |
| Name: | HILL, JAYNE B | |
| Address: | 6439 WOOD VALLEY ROAD | |
| City-St-Zip: | JACKOSNVILLE, FL 32217 | |
| Title: | O | ( ) Delete |
| Name: | BARTON, TERESA K | |
| Address: | 4250 LAKESIDE DRIVE, SUITE 300 | |
| City-St-Zip: | JACKSONVILLE, FL 32210 | |
| Title: | S | ( ) Delete |
| Name: | JORGENSEN, MICHAEL E | |
| Address: | 7555 BEACH BOULEVARD | |
| City-St-Zip: | JACKSONVILLE, FL 32216 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | S | (X) Change ( ) Addition |
| Name: | JORGENSEN, MICHAEL E | |
| Address: | 8787 BAYPINE ROAD | |
| City-St-Zip: | JACKSONVILLE, FL 32256 | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DARBY L. STUBBERFIELD DIR 03/24/2008
Electronic Signature of Signing Officer or Director — Date