

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra D. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 706757 (2)
1. Corporation Name
SERTOMA BREAKFAST CLUB OF JACKSONVILLE, INC.

Principal Place of Business Mailing Address
311 W. MONROE ST. 311 W. MONROE ST.
PO BOX 744 PO BOX 744
JACKSONVILLE FL 32202 JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/28/1964 3a. Date of Last Report 05/20/1994
4. FEI Number 59-6213283 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.
22 P.O. Box 744 27 P.O. Box 744
23 City & State City & State
24 Jacksonville, FL 28 Jacksonville, FL
25 Zip 32202 29 Zip 32202 30 Country

9. Name and Address of Current Registered Agent
CULPEPPER, JAMES G
33 S HOGAN ST STE 210
JACKSONVILLE FL 32202
10. Name and Address of New Registered Agent
81 Name HALL, RICHARD
82 Street Address (P.O. Box Number is Not Acceptable)
83 5144 SANTA CRUZ LN.
84 City JACKSONVILLE FL 85 Zip Code 32210

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 Richard Hall Richard Hall Treasurer 4-25-95
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 1.1 TITLE ☐ Change ☐ Addition
NAME FRUMERIE, WALTER 1.2 NAME
STREET ADDRESS 5852 TANGELWOOD LN. 1.3 STREET ADDRESS
CITY-ST-ZIP JACKSONVILLE, FL 00000 1.4 CITY-ST-ZIP
TITLE DV 2.1 TITLE ☒ Change ☐ Addition
NAME SMALLWOOD, WILLIAM 2.2 NAME
STREET ADDRESS 8129 FT. CAROLINE RD. 2.3 STREET ADDRESS
CITY-ST-ZIP JACKSONVILLE, FL 00000 2.4 CITY-ST-ZIP
TITLE MEENA, LINCOLN 3.1 TITLE ☒ Change ☐ Addition
NAME 3.2 NAME
STREET ADDRESS 2981 RIVERSIDE AVE 3.3 STREET ADDRESS
CITY-ST-ZIP JACKSONVILLE, FL 00000 3.4 CITY-ST-ZIP
TITLE CULPEPPER, JAMES G 4.1 TITLE ☒ Change ☐ Addition
NAME 4.2 NAME
STREET ADDRESS 33 S HOGAN ST 4.3 STREET ADDRESS
CITY-ST-ZIP JACKSONVILLE FL 4.4 CITY-ST-ZIP
TITLE HALL, RICHARD 5.1 TITLE ☒ Change ☐ Addition
NAME 5.2 NAME
STREET ADDRESS 5144 SANTA CRUZ LN 5.3 STREET ADDRESS
CITY-ST-ZIP JACKSONVILLE, FL 00000 5.4 CITY-ST-ZIP
TITLE SKELTON, WAYNE 6.1 TITLE ☒ Change ☐ Addition
NAME 6.2 NAME
STREET ADDRESS 10950 ASHBOURNE TR 6.3 STREET ADDRESS
CITY-ST-ZIP JACKSONVILLE, FL 00000 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)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Hall Richard Hall 4-25-95 904 771-5039
Signature and typed or printed name of signing officer or director Date (Daytime Phone #)