

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709028

FILED
Jan 05, 2007
Secretary of State

Entity Name: THE ARC JACKSONVILLE, INC.

Current Principal Place of Business:

ATTN: JOYCE GIBSON
1050 NORTH DAVIS STREET
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

Current Mailing Address:

ATTN: JOYCE GIBSON
1050 NORTH DAVIS STREET
JACKSONVILLE, FL 32209 US

New Mailing Address:

FEI Number: 59-6209603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHITTAKER, JAMES
1050 NORTH DAVIS ST
JACKSONVILLE, FL 32209 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: GUTOS, STEVAN
Address: 14247 FALCONHEAD CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: C () Delete
Name: WITTENSTEIN, IRA
Address: 4800 EAST DEER LAKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: NOWIKOWSKI, ELISE
Address: 2405 LAUREL ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: GUTOS, STEVAN
Address: 3030 HARTLEY RD STE 290
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD () Delete
Name: WERKING, HELEN
Address: 9090 BARRISTER CT
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD () Delete
Name: JOHNSON, DEBBIE
Address: 5310 HAMPTON GABLE COURT WEST
City-St-Zip: JACKSONVILLE, FL 32257

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: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBBIE JOHNSON

TD

01/05/2007

Electronic Signature of Signing Officer or Director

_____ Date