2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710075

FILED Feb 15, 2010 Secretary of State

New Principal Place of Business:

Entity Name: JOE A. ADAMS FAMILY FOUNDATION, INC.

Current Principal Place of Business:

4143 SHERWOOD RD

JACKSONVILLE, FL 32210

Current Mailing Address: New Mailing Address:

P.O. BOX 7929 4143 SHERWOOD RD JACKSONVILLE, FL 32238 JACKSONVILLE, FL 32210

FEI Number: 59-6167570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ANDREWS, JAMES H JR
4143 SHERWOOD RD
4595 LEXINGTON AVE.
JACKSONVILLE, FL 32210 US
JACKSONVILLE, FL 32210 US

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: SANDRA M. RALSTON 02/15/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DT

 Name:
 ANDREWS, JOE A

 Address:
 4579 BIRCHWOOD AVE

 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: DP

Name: ANDREWS, JAN A
Address: 4143 SHERWOOD RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: DV

 Name:
 ANDREWS, JONATHAN

 Address:
 4143 SHERWOOD RD

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: DC

 Name:
 FELTON, SUZANNE A

 Address:
 4670 ARLON LN

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: DS

 Name:
 MILNE, DOUGLAS J

 Address:
 4595 LEXINGTON AVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

SIGNATURE: JAN A. ANDREWS PRES 02/15/2010