

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710405

FILED  
Jun 22, 2009  
Secretary of State

**Entity Name:** THE JACKSONVILLE HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

317 A PHILIP RANDOLPH BLVD  
JACKSONVILLE, FL 32202 US

**New Principal Place of Business:**

**Current Mailing Address:**

317 A PHILIP RANDOLPH BLVD  
JACKSONVILLE, FL 32202 US

**New Mailing Address:**

**FEI Number:** 59-6198589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

LISSKA, EMILY R  
317 A PHILIP RANDOLPH BLVD  
JACKSONVILLE, FL 32202 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SPINKS, JERRY  
Address: 3215 OAK STREET  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: V ( ) Delete  
Name: BROWN, CARL W  
Address: 4734 WAVERLY LANE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: V ( ) Delete  
Name: BOOTH, EDWARD  
Address: 2722 RIVERWOOD LANE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: LISSKA, EMILY R  
Address: 317 A. PHILIP RANDOLPH BLVD  
City-St-Zip: JACKSONVILLE, FL 32202

Title: S ( ) Delete  
Name: MASUCCI, SUSAN  
Address: 8103 FT. CAROLINE ROAD  
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: T (X) Delete  
Name: STEVENS, JAMES P  
Address: 933 GRANADA BLVD. S  
City-St-Zip: JACKSONVILLE, FL 32207 US

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

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

Title: V (X) Change ( ) Addition  
Name: BOOTH, EDWARD  
Address: 2722 RIVERWOOD LANE  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: S (X) Change ( ) Addition  
Name: STEVENS, JAMES P  
Address: 210 E. FORSYTH STREET  
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: T (X) Change ( ) Addition  
Name: FACKLER, WILLIAM  
Address: 3809 TIMUQUANA ROAD  
City-St-Zip: JACKSONVILLE, FL 32210 US

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

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: EMILY LISSKA

D

06/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date