

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710405

FILED  
Apr 08, 2011  
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)

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

LISSKA, EMILY R  
317 A PHILIP RANDOLPH BLVD  
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: P  
Name: SPINKS, JERRY  
Address: 3215 OAK STREET  
City-St-Zip: JACKSONVILLE, FL 32205 US

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

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

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

Title: T  
Name: FACKLER, WILLIAM  
Address: 3809 TIMUQUANA ROAD  
City-St-Zip: JACKSONVILLE, FL 32210 US

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: EMILY R LISSKA

D

04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date