2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712199

FILED Jan 04, 2007 Secretary of State

Entity Name: JACKSONVILLE COMMUNITY COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

2434 ATLANTIC BLVD SUITE 100

JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

2434 ATLANTIC BLVD SUITE 100

JACKSONVILLE, FL 32207 US

FEI Number: 59-1163905 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:

CRAMER, CHARLES R 2434 ATLANTIC BLVD SUITE 100 JACKSONVILLE, FL 32207 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: T (X) Change () Addition Name: SMITH, MARY ELLEN Name: AUTREY, RON

Address: 8203 HOLLYRIDGE ROAD Address: PO BOX 1799

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32201

Title: V () Delete Title: P (X) Change () Addition

Name: GEIGER, ALLAN T
Address: 1301 RIVERPI ACE BI VD #1500
Address: 1301 RIVERPI ACE BI VD #1500
Address: 1301 RIVERPI ACE BI VD #1500

 Address:
 1301 RIVERPLACE BLVD #1500
 Address:
 1301 RIVERPLACE BLVD #1500

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32207

Name: JACKSON, HELEN Name: JACKSON, HELEN

Address: 8008 WHISPER LAKE LANE E. Address: 8008 WHISPER LAKE LANE E. City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: CHARLES R CRAMER RA 01/04/2007