2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007
Secretary of State

DOCUMENT# 719573

Entity Name: THE JACKSONVILLE ZOOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

370 ZOO PKWY
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

370 ZOO PARKWAY
JACKSONVILLE, FL 32218 US

New Mailing Address:

FEI Number: 59-1319010 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATE, DENNIS E
370 ZOO PARKWAY
JACKSONVILLE, FL 32218 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: TD ( ) Delete
Name: ZAMBETTI, MICHAEL
Address: 370 ZOO PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: VCM ( ) Delete
Name: SURFACE, HEATHER
Address: 370 ZOO PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: C ( ) Delete
Name: COKER, HOWARD
Address: 370 ZOO PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: VCD ( ) Delete
Name: BAKER, MARTHA
Address: 370 ZOO PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD ( ) Delete
Name: MERRITT, KENYON
Address: 370 ZOO PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: VCG ( ) Delete
Name: BAKER, ANN
Address: 370 ZOO PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

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: MICHAEL ZAMBETTI TD 03/20/2007
Electronic Signature of Signing Officer or Director Date