2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719573

FILED Mar 20, 2009 Secretary of State

Entity Name: THE JACKSONVILLE ZOOLOGICAL SOCIETY, INC.

Current Principal Place of Business:			New Princip	New Principal Place of Business:	
370 ZOO P JACKSON\	KWY /ILLE, FL 322	18 US			
Current Ma	ailing Addres	s:	New Mailing	Address:	
370 ZOO P. JACKSON\	ARKWAY /ILLE, FL 322	18 US			
FEI Number:	59-1319010	FEI Number Applied Fo	r() FEI Number Not Applica	able () Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered A	jent: Name and A	ddress of New Registered Agent:	
PATE, DEN 370 ZOO P. JACKSON\		18 US	JOHNSON, J 370 ZOO PA JACKSONVII		
The above in the State		submits this statement	for the purpose of changing its	registered office or registered agent, or both,	
SIGNATUR	E: JANET C	JOHNSON		03/20/2009	
	Electron	ic Signature of Regist	ered Agent	Date	
OFFICERS	AND DIREC	TORS:	ADDITIONS	CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TD () LEE, LEWIS 370 ZOO PARK JACKSONVILLE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCM () LOVETT, RAD 370 ZOO PARK JACKSONVILLE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C () BAKER, ANN 370 ZOO PARK JACKSONVILLE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCCC () CANNON, CARI 370 ZOO PARK JACKSONVILLE	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () FOUTS, LOU 370 ZOO PARK JACKSONVILLE		Name: M Address: 3	SD (X) Change () Addition KENDRICK, WANYONYI 370 ZOO PARKWAY JACKSONVILLE, FL 32218	
Title: Name: Address: City-St-Zip:	VCG () BAKER, MARTH 370 ZOO PARK JACKSONVILLE	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LEWIS LEE TD 03/20/2009