

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719942

**FILED**  
**Jan 05, 2004**  
**Secretary of State****Entity Name:** GIRLS INCORPORATED OF JACKSONVILLE**Current Principal Place of Business:**2916 UNIVERSITY BLVD W  
STE 203  
JACKSONVILLE, FL 32217**New Principal Place of Business:**1627 ROGERO ROAD  
JACKSONVILLE, FL 32211**Current Mailing Address:**2916 UNIVERSITY BLVD W  
STE 203  
JACKSONVILLE, FL 32217**New Mailing Address:**1627 ROGERO ROAD  
JACKSONVILLE, FL 32211**FEI Number:** 59-1317196**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**COUGHLIN, RENA  
2916 UNIVERSITY BLVD W STE 203  
JACKSONVILLE, FL 32217 US**Name and Address of New Registered Agent:**COUGHLIN, RENA  
1627 ROGERO ROAD  
JACKSONVILLE, FL 32211 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: \_\_\_\_\_

01/05/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: REGISTER, SUE  
Address: 11905 LITTLE CREEK LANE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: DS ( ) Delete  
Name: HENDERSON, ALISON  
Address: 2916 UNIVERSITY BLVD W STE 203  
City-St-Zip: JACKSONVILLE, FL 32217

Title: DT ( ) Delete  
Name: BOYNTON, LORI  
Address: 2916 UNIVERSITY BLVD W STE 203  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete  
Name: PRITCHARD, ROB  
Address: 4352 ST ADAMS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32257

Title: DP ( ) Delete  
Name: STEPHENS, JOANN  
Address: 2916 UNIVERSITY BLVD W STE 203  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete  
Name: MURPHY, ELLEN  
Address: 9252 SAN JOSE BLVD #3403  
City-St-Zip: JACKSONVILLE, FL 32257

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

Title: C (X) Change ( ) Addition  
Name: PRITCHARD, ROBERT  
Address: 1627 ROGERO ROAD  
City-St-Zip: JACKSONVILLE, FL 32211

Title: DS (X) Change ( ) Addition  
Name: WEEDER, RADHA  
Address: 1912 CREEKSIDE CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32233

Title: DT (X) Change ( ) Addition  
Name: LALIBERTE, ANDREA  
Address: ONE COACH WAY  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change ( ) Addition  
Name: MANNING, JOANN  
Address: 1366 KINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: DP (X) Change ( ) Addition  
Name: REGISTER, SUE  
Address: 11905 LITTLE CREEK LANE  
City-St-Zip: JACKSONVILLE, FL 32223

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 Section 119.07(3)(i), 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: ROBERT PRITCHARD

C

01/05/2004

Electronic Signature of Signing Officer or Director

Date