

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720382

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** THE SOUTHERN ACADEMY OF LETTERS, ARTS AND SCIENCES, INCORPORATED

**Current Principal Place of Business:**

P.O. BOX 1573  
JACKSONVILLE, FL 32201

**New Principal Place of Business:**

1200 RIVERPLACE BOULEVARD  
SUITE 800  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

P.O. BOX 1573  
JACKSONVILLE, FL 32201 US

**New Mailing Address:**

**FEI Number:** 23-7162171      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RINAMAN JR, JAMES C  
1200 RIVERPLACE BLVD  
STE-800  
JACKSONVILLE, FL 32207 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: PD ( ) Delete  
Name: RINAMAN, JAMES C. J  
Address: 1200 RIVERPLACE BLVD., STE. 800  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: COBB, JAMES E  
Address: 1301 RIVERPLACE BLVD STE 1609  
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD ( ) Delete  
Name: SHERIDAN, ALICE D  
Address: 804 2ND ST  
City-St-Zip: NEPTUNE BEACH, FL

Title: D ( ) Delete  
Name: THOMAS, NANCY R  
Address: 2149 HOLLY OAKS RIVER DR  
City-St-Zip: JACKSONVILLE, FL 32225

Title: ATD ( ) Delete  
Name: BARRE, BARRETT S  
Address: 2601 SOUTH SECOND ST.  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**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:

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: JAMES C. RINAMAN

PD

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date