
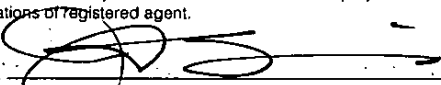
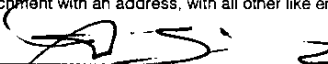


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90038 012 ****70.00

| | | | | | |
|---|---|---|---|--|--|
| DOCUMENT # 726212 1. Entity Name VOLUNTEER JACKSONVILLE, INC. | | | |  | |
| Principal Place of Business 4049 WOODCOCK DR SUITE 100 JACKSONVILLE, FL 32207 US | | | | Mailing Address 4049 WOODCOCK DR SUITE 100 JACKSONVILLE, FL 32207 US | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | | |
| 4. FEI Number 59-1466484 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| SMITH, JUDITH A 4046 WOODCOCK DRIVE, STE 100 JACKSONVILLE, FL 32207 | | | | Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE:  <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2005 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GREENHUT, JUDI 11012 FRISCO LANE JACKSONVILLE, FL 32223 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D REDDICK, KENNETH 7330 LEM TURNER ROAD JACKSONVILLE, FL 32208 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SELEVAN, LINDA 103 ANNAPOLIS LANE PONTE VEDRA BEACH, FL 32082 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SIMMONS, BRENDA DR 4501 CAPPER ROAD JACKSONVILLE, FL 32218 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD NORMAN, MARI-ESTHER 1460 VANTAGE WAY JACKSONVILLE, FL 32218 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GOLD, ROBERT DR. 4026 EAST WINDSOR PARK DRIVE JACKSONVILLE, FL 32224 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |
| <div style="display: flex; justify-content: space-between;"> Date Daytime Phone # </div> | | | | | |

50027339



02172005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1466484

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

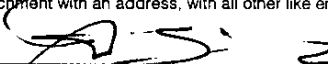
☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

See attached for changes

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

ATTACHMENT

50027339

Addendum to 2005 Not-For-Profit Corporation Annual Report

Document #726212

Volunteer Jacksonville, Inc.

Section 11:

Please add the following officers and directors (in addition to changes already made on report):

PD – Franskousky, Robert
510 Highway A1A North
Ponte Vedra Beach, FL 32082

VD- Greenhut, Steven
245 Riverside Ave., Suite 400
Jacksonville, FL 32202

TD - Flatt, Stephen
4500 Salisbury Road, Suite 200
Jacksonville, FL 32216

D - Atkins, Joy
8001 Baymeadows Road
Jacksonville, FL 32256

D - Bentley, William
1400 I Street NW #900
Washington, DC 20005

D - Brown, Laura
112 PGA Tour Boulevard
Ponte Vedra Beach, FL 32082

Section 10:

Please change the following individual's information, who is already on the Annual Report:

D - Reddick, Kenneth
3753 Jacob Cove Way
Jacksonville, FL 32218