


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90011 003 ****70.00

DOCUMENT # 726212 1. Entity Name VOLUNTEER JACKSONVILLE, INC.					
Principal Place of Business 6817 SOUTHPOINT PKWY STE 1902 JACKSONVILLE, FL 32216 US			Mailing Address 6817 SOUTHPOINT PKWY STE 1902 JACKSONVILLE, FL 32216 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01312008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-1466484	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMITH, JUDITH A 6817 SOUTHPOINT PKWY STE 1902 JACKSONVILLE, FL 32216				7. Name and Address of New Registered Agent 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) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	PD FRANKOUSKEY, ROBERT 510 A1A N PONTE VEDRA BEACH, FL 32082	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gleeson, Jill 4800 Deerwood Campus Pkwy OC3/6 Jacksonville, FL 32246	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REDDICK, KENNETH 3753 JACOB COVE WAY JACKSONVILLE, FL 32218	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Brown, Laura 112 PGA TOUR Blvd. Ponte Vedra Beach, FL 32082	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SELEVAN, LINDA 103 ANNAPOLIS LANE PONTE VEDRA BEACH, FL 32082	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO Cleveland, Holly 225 Water St. 2nd floor Jacksonville, FL 32202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMONS, BRENDA DR 4501 CAPPER ROAD JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Smith, Judith 6817 Southpoint Pkwy - Ste. 1902 Jacksonville, FL 32216	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NORMAN, MARI-ESTHER 1460 VANTAGE WAY JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Ackerman, Kenneth 4600 San Pablo Road Jacksonville, FL 32224	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ATKINS, JOY 8001 BAYMEADOWS ROAD JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bentley, Bill 1000 Vermont Ave. NW Ste 700 Washington, DC 20005	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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>					
<small>Date Daytime Phone #</small>					

ATTACHMENT 400.34674
726212

Volunteer Jacksonville, Inc., 6817 Southpoint Pkwy Ste 1902, Jacksonville, FL 32216
Addendum to section 10, 11 Officers & Directors, Document # 726212

D Cuba, Nelson 5530 Beach Boulevard Jacksonville, FL 32207	addition
D Farah, James 3060 Mercury Road Jacksonville, FL 32207	addition
D Hearon, Michael 4500 Salisbury Rd., Ste.200 Jacksonville, FL 32216	addition
D Houston, Bill One Alltel Stadium Place Jacksonville, FL 32202	addition
D King, Linda 13724 Pleasant Valley Dr. Jacksonville, FL 32225	addition
D Spohrer, Robert 701 West Adams St., Ste. 2 Jacksonville, FL 32204	addition