## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 727385**

2. Principal Place of Business

PIERCE, HARRY A JR.

227 W. FORSYTHE ST. JACKSONVILLE FL 32202

Suite, Apt. #, etc

City & State

Zip

US



1. Entity Name CIVITAN CLUB OF JACKSONVILLE, INC. Principal Place of Business Mailing Address POST OFFICE BOX 93 POST OFFICE BOX 93 JACKSONVILLE FL 32201 JACKSONVILLE FL 32201

3. Mailing Address

Suite, Apt. #, etc.

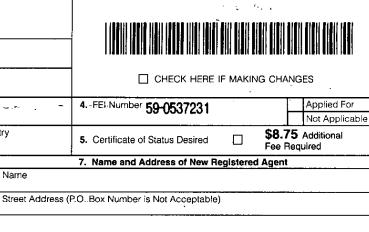
City & State\_

Zip

FILED								
Jan 27, 2003 8:00 am								
Secretary of State								

01-27-2003 90207 002 \*\*\*\*61.25

AAATTAAA



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.

City

Country

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Country

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE	NOW:	FEE	IS	\$61.25

9. Election Campaign Financing

\$5.00 May Be

Make Check Payable to

Zip Code

VILL 11017. VEL 10 401.23		Trust Fund Contribution.		Added to Fees Florida Department of State			
10. OFFICERS AND DIRECTORS		:	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			10
TITLE	SD	☐ Delete	TITLE				Addition
NAME	WATKINS, CLARA L	LI Delete	NAME			Change	☐ Addition
STREET ADDRESS	2085 MILLS RD		STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		CITY-ST-ZIP				
TITLE	D ·	Delete '	TITLE	(1 1 No	11-d(4)	☐ Change	☐ Addition
NAME	BRINKMAN, WALTER H.	Z	NAME	Directify In	That was	.;	<u>√</u> /
STREET ADDRESS	4343 IRVINGTON AVENUE		STREET ADDRESS	7741 Deerwa	od pr. se.		
CITY-ST-ZIP	JACKSONVILLE FL 32210		CITY-ST-2IP	Shealys M 7741 Deerwo Jay FL 32	256		
TITLE	D	☐ Delete	TITLE			☐ Change	Addition
NAME	GITTINGS, ROBERT L	1	NAME				
STREET ADDRESS	4933 LONG BOW RD	į	STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		CITY-ST-ZIP				
TITLE	P	☐ Delete :	TITLE			☐ Change	☐ Addition
NAME	PIERCE, HARRY A JR.		NAME				- 1
STREET ADDRESS	227 W FORSYTHE STREET		STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32202		CITY-ST-ZIP				
TITLE		☐ Delete	TITLE	" -		☐ Change	☐ Addition
NAME			NAME			_ •	
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				1
TITLE	•	☐ Delete !	TITLE			☐ Change	Addition
NAME			NAME			•	
STREET ADDRESS		'	STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP		•		

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.