

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 727697

FILED
Apr 10, 2003
Secretary of State

Entity Name: CULTURAL COUNCIL OF GREATER JACKSONVILLE, INC.

Current Principal Place of Business:

300 W WATER ST
STE 201
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

300 W WATER ST
STE 201
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 23-7347442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAUL, ROBERT H
6001 BOWDENDALE AVENUE
JACKSONVILLE, FL 32216

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: S/D () Delete
Name: CLINE, ELIZABETH
Address: 835 BUCKEY LANE WEST
City-St-Zip: JACKSONVILLE, FL 32259

Title: C () Delete
Name: PAUL, ROBERT
Address: 6001 BOWDENDALE AVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: V/D () Delete
Name: OVERTON, CONSTANCE R
Address: 3751 OAK POINT AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: VC/D () Delete
Name: BONEY, MISSY
Address: 1819 GOODWIN STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: T/D () Delete
Name: HYMAN, CHUCK
Address: 4300 MARSH LANDING BLVD STE 201
City-St-Zip: JACKSONVILLE BEACH, FL 32050

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: VC/D (X) Change () Addition
Name: BONEY, ANN
Address: 1819 GOODWIN STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: T/D (X) Change () Addition
Name: HYMAN, CHARLES D
Address: 4300 MARSH LANDING BLVD STE 201
City-St-Zip: JACKSONVILLE BEACH, FL 32050

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 PAUL

C

04/10/2003

Electronic Signature of Signing Officer or Director

Date