2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738988

FILED May 18, 2009 Secretary of State

Entity Name: GARDEN CLUB OF JACKSONVILLE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1005 RIVERSIDE AVENUE JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

1005 RIVERSIDE AVENUE JACKSONVILLE, FL 32204

FEI Number: 59-0520717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HOWARTH, HELEN S OWENS, ELLEN B 1005 RIVERSIDE AVE 1005 RIVERSIDE AVE

JACKSONVILLE, FL 32204 US JACKSONVILLE, FL 32204 US

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: ELLEN B. OWENS 05/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VD2 () Delete Title: VD2 (X) Change () Addition

 Name:
 OWENS, BROOK
 Name:
 WOODWORTH, IRENE

 Address:
 4180 JULINGTON CREEK RD
 Address:
 12894 LA COSTA CT.

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: P () Delete Title: V1 (X) Change () Addition Name: MAHON, NANCY Name: LEMAISTRE, ANN

Name: MAHON, NANCY Name: LEMAISTRE, ANN
Address: 3606 PT PLEASANT RD Address: 3780 BETTES LANE
City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32210

 $\label{eq:title: V1 () Delete Title: V2 (X) Change () Addition} Title: V2 (X) Change () Addition$

 Name:
 WOODWORTH, IRENE
 Name:
 POWERS, BETSY

 Address:
 12894 LA COSTA CT.
 Address:
 4480 BAY HARBOUR DR.

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: TD () Delete Title: TD (X) Change () Addition

Name:HOWARTH, HÉLENName:OWENS, ELLEN BAddress:1253 WESTLAWN DRIVEAddress:4180 JULINGTON CREEK RDCity-St-Zip:JACKSONVILLE, FL 32211City-St-Zip:JACKSONVILLE, FL 32223

Title: ATD () Delete Title: () Change () Addition

 Name:
 CHOPSKIE, NAN
 Name:

 Address:
 7834 HUNTERS GROVE ROAD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32256
 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: IRENE WOODWORTH VD2 05/18/2009