


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 752086</b>	
1. Entity Name DUVAL SCHOOL ADMINISTRATION BUILDING, INC.	

Principal Place of Business 1901 SERVICE ST JACKSONVILLE, FL 32207	Mailing Address 1901 SERVICE ST JACKSONVILLE, FL 32207
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  HARRELL, WILLIAM H 1901 SERVICE STREET JACKSONVILLE, FL 32207	DO NOT WRITE IN THIS SPACE
7. 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 reappointing)</small>		DATE _____
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<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000089929 03/16/04-80008-020 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HARRELL, WILLIAM H 1901 SERVICE STREET JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD MATHIAS, DOROTHY DANESE 341 BAISDEN RD. JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD DIGIANDOMENICO, JOANN 2796 JEWEL ROAD JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD NOONEY, JACK 1035 ELDER LANE JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SIMMONS, CHARLES E JR 1980 EDGEWOOD AVE W JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE  
IN THIS SPACE

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.

<b>SIGNATURE:</b> <u>William H. Harrell</u>	<u>3/15/04</u>	<u>904-398-7177</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>

WILLIAM H. HARRELL