FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

[illegible] 11 9: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **754869** (6)

1. Corporate Name

THE SEEKERS OF JACKSONVILLE, INC.

Principal Place of Business	Mailing Address
5545 ARLINGTON ROAD OFFICE G JACKSONVILLE FL 32211	5545 ARLINGTON ROAD OFFICE G JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/28/1980**

3a. Date of Last Report: **05/01/1994**

4. FEI Number: **59-2253718** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business
21 3943 ST. ISABEL DR. E.
22 Suite, Apt. #, etc.
23 City & State: JACKSONVILLE FL.
24 Zip: 32277 25 Country: USA

2a. Mailing Address
26 P.O. BOX 2244
27 Suite, Apt. #, etc.
28 City & State: ORANGE PARK, FL.
29 Zip: 32067-2244 30 Country: USA

9. Name and Address of Current Registered Agent

~~MCINTYRE, ROD~~
~~6120 KELLOW DRIVE~~
~~JACKSONVILLE FL 32216~~

10. Name and Address of New Registered Agent

81 Name: RALPH ANTHONY GOMEZ
82 Street Address (P.O. Box Number is Not Acceptable): 3943 ST ISABEL DR E
83
84 City: JACKSONVILLE FL 85 Zip Code: 32277

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 4/24/95
Signature of New Registered Agent, if changing — Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE	~~SD~~	TITLE	P/D ☒ Change ☐ Addition
NAME	~~FRANKS, LOUIS D.~~	NAME	GOMEZ, RALPH ANTHONY
STREET ADDRESS	~~5545 ARLINGTON RD #G~~	STREET ADDRESS	3943 ST. ISABEL DR. E.
CITY ST ZIP	~~JACKSONVILLE FL~~	CITY ST ZIP	JACKSONVILLE, FL. 32277
TITLE	~~PD~~	TITLE	V ☒ Change ☐ Addition
NAME	~~MCINTYRE, ROD~~	NAME	WOODARD, DAVID
STREET ADDRESS	~~5545 ARLINGTON RD H~~	STREET ADDRESS	4961 ORTEGA FARMS BLVD, #2
CITY ST ZIP	~~JACKSONVILLE, FL 00000~~	CITY ST ZIP	JACKSONVILLE, FL. 32210
TITLE	~~VPD~~	TITLE	S ☒ Change ☐ Addition
NAME	~~MAUPIN, DEBBIE~~	NAME	NYMAN, SHELLEY
STREET ADDRESS	~~5545 ARLINTON RD, G~~	STREET ADDRESS	1442 LANE CIR E
CITY ST ZIP	~~JACKSONVILLE FL~~	CITY ST ZIP	JACKSONVILLE, FL. 32254
TITLE		TITLE	T/D ☐ Change ☒ Addition
NAME		NAME	BYRUM, MARK W.
STREET ADDRESS		STREET ADDRESS	553 CLAIRE LN.
CITY ST ZIP		CITY ST ZIP	ORANGE PARK, FL. 32073
TITLE		TITLE	D ☐ Change ☒ Addition
NAME		NAME	DIEBEL, ROBERT A.
STREET ADDRESS		STREET ADDRESS	6421 COLLINS RD
CITY ST ZIP		CITY ST ZIP	JACKSONVILLE, FL. 32244
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR

4/24/95 — 748-3477
Date — Daytime Phone #

0026589