FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 755830

(7)

JACKSONVILLE ECONOMIC DEVELOPMENT COMPANY, INC.

Principal Place of Business Mailing Address				- 14000 3000 1000 1000 1000 1000 1000 100		
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oseph e. Whit 28 East Fors)	areh (TH STREET, SUITE 500	JOSEPH E. WHITAKER 128 EAST FORSYTH STREE	T. SUITE 500			
ACKSONVILLE FL 32202		JACKSONVILLE FL 32202-3	JACKSONVILLE FL 32202-3366		3. Date Incorporated or Qualified	3a. Date of Last Report
A Delivatival D	No. of D. sister	1 6 44-90 Addition			01/12/1981	03/04/1996
21 Principal P	lace of Business	2a. Mailing Address			4. FEI Number 59-2157833	Applied For
Suite, Apt #, etc.		Suite, Apt. #, etc.				Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in	
24	25 9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of New Reg	Yes No
			B1 N	ame		
JOSEPH I	82 S	tract Adde	ress (P.O. Box Number is Not Acceptab	la)		
	FORSYTH ST.		02 3	ireet Addi	ess (F.O. box Number is Not Acceptab	le)
SUITE 50			83			**************************************
JACKSON	IVILLE FL 32202		84 C	itγ		85 Zip Code
				,		FL S Z D COOK
office or r	to the provisions of Sections 617.05 registered agent, or both, in the Sta Im familiar with, and accept the obli	te of Florida. Such change was	authorized by the	imed corp e corporat	poration submits this statement for the polion's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
SIGNATURE						DATE
12.	Signature, typed or printed name of registered a OFFICERS A	ND DIRECTORS	TE Registered Agent s	gnature requir	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	1.1 TITLE	C+	IAIRMAN	hange Addition
NAME	JOSEPH E. WHITAKER,	1.2 NAME	L	OCK W. RELAND		
STREET ADDRESS					25 WATER ST., Sui	
CITY-ST-ZIP	JACKSONVILLE FL 32202		1.4 CITY - \$T - ZI	P J/	ACKSONULLE FL 32	202
TITLE	D	☐ DELETE	2.1 TITL€	N.		Change Addition
NAME	GREENE, ARNETT		2.2 NAME		RIS JONES	Carren
STREET ADDRESS	2737 EDGEWOOD AVE, W		2.3 STREET ADD		2218 PINK PANTHER	
CITY-ST-ZIP	JACKSONVILLE FL	Dri trr	2. 4 CITY-ST-Z		ACKSONUILLE, FL 3	
TITLE	D proper	DELETE	3.1 TITLE			Change Addition
NAME CARREL ADDRESS	SMITH, JESSE		3.2 NAME	2000		
STREET ADDRESS	128 E FORSYTH ST JACKSONVILLE FL		3.3 STREET ADD	l		!
CITY-ST-ZIP	DACKSONVILLE PL	DELETE	3.4. CITY-ST-Z 4.1 TITLE	<u>- </u>		Change Addition
NAME	RICHARD TOSH		4. 2 NAME			Print annually from translation
STREET ADDRESS	3740 BEACH BLVD.		4.3 STREET ADD	RESS		
CITY-ST-ZIP	JACKSONVILLE FL 32207		4.4 CITY - ST - 2)	•		
TITLE	* >	☐ DELETE	5.1 TITLE			Change Addition
NAME	PAPPAS, LYNN		5.2 NAME			
STREET ADDRESS	200 WEST FORSYTHE ST #1	400	5.3 STREET ADD	ress		
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY - ST - ZI	Р		
TITLE	8	☐ DELETE	6.1 TITLE	Į		Change Addition
NAME	RON WILKINS,	N=44	6.2 NAME			
STREET ADDRESS	50 N. LAURA STREET, STE. 3	3700	6.3 STREET ADD			
CITY-ST-ZIP	JACKSONVILLE FL 32202 by certify that the information suppl	ied with this filing does not oue	6.4 City-St-Zi		in Section 119.07(3)(i), Florida Statutes	I further certify that the
informatio	on indicated on this annual report of	r signiemental annual renort is	true and accurat	a and that	my signature shall have the same legal	effect as if made under nath: that
appears	in Block 12 or Block 13 if changed.	or the receiver or trustee empo or on an attachment with an ac	wereu io execute ddress.	ous repor	t as required by Chapter 617, Florida St	auties; and that my name
	HI Her	Valet.	1 4			4>630-1624
SIGNAT	URE:	JOSEPH	E. WHI	HKEI	< 1/2/97\7°	7 9 30 - 1 04 7

FILED

Feb 05 1997 8:00am

Secretary of State