FILED 2002 UNIFORM BUSINESS REPORT (UBR) Feb 11, 2002 8:00 am Secretary of State DC)CUMENT # **755830** 1. Er titý Name 02-11-2002 90229 048 ****70.00 JARKSONVILLE ECONOMIC DEVELOPMENT COMPANY, INC. Pr/incipal Place of Business Mailing Address 220 E BAY STREET 220 E BAY STREET STE 1300 STE 1300 JACKSONVILLE FL 32202 JACKSONVILLE FL 32202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-2157833 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WHITAKER, JOSPEH E 220 E BAY ST **STE 401** Zip Code JACKSONVILLE FL 32202 FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Fiorida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (9/01)TITLE Delete TITLE ☐ Change Addition Joseph E. Whitaker . NAME NAME **CR2E037** STREET ADDRESS 220 E BAY STREET STE 1319 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32202 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change GREENE, ARNETT NAME NAME STREET ADDRESS 2737 EDGEWOOD AVE, W STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP TITLE Delete TITLE ☐ Addition IREL'AND, LOCK W NAME NAME STE 202 3060 LEON RD 3060 IRON ROAD STE 202 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32246 CD ☐ Change ☐ Addition TITLE Delete TITLE RON WILKINS, NAME NAME STREET ADDRESS 1301 RIVERPLACE BLVD, #1901 STREET ADDRESS PROFESSIONAL DRIVE STE 104 CITY-ST-ZIP JACKSONVILLE FL 32202 CITY-ST-ZIP PONTE VEDRA BEACH, FL 32254 ☐ Delete TITLE ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE

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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: X

NAME

STREET ADDRESS

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/02 904.630.1624

Jacksonville Economic Develeppon TousBA: 904-443-1900 www.sba.gov

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