2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #755830

SIGNATURE:

1. Entity Name
JACKSONVILLE ECONOMIC DEVELOPMENT COMPANY,
INC.



FILED Apr 07, 2006 8:00 am Secretary of State

04-07-2006 90029 013 ****61.25

					1						
1300 RIVERPLACE BLVD, SUITE 107		Mailing Address 1300 RIVERPLACE BLVD, SUITE 107 JACKSONVILLE, FL 32207 US			•						
2. Principal Place of Business 3.			3. Mailing Address						BIBN BIBN EN		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01302006	Chg-NP	CR2E037	(11/05)			
City & State		City & State			4. FEI Number 59-215				oplied For ot Applicable		
Zip	Zip Country		Zip	Zip Country		5. Certificate	of Status Desired		8.75 Add	ditional	
	6. Name	and Address of Current Re	gistered Agent			7. Name and	Address of New R	egistered Ag	gent .		
WARREN,	CLEVE			1	lame						
1300 RIVERPLACE BLVD. STE. 105				Street Address (P.O. Box Number is Not Acceptable)				
JACKSONVILLE, FL 32207											
					City			FL	Zip Cod		
	named entity tions of regist	submits this statement for the	he purpose of changing its	registered o	office or regist	ered agent, or bot	h, in the State of Flo	orida. I am fa	miliar with,	and accept	
3											
SIGNATURE											
	Signature, typed	or printed name of registered agent and	table if applicable. (NOTE	: Registered Age	ent signature requir	ed when reinstating)		DATE			
Filing Fee Is \$61.25 Due by May 1, 2006				9. Election Campaign Financing Trust Fund Contribution.			L L				
	_			. •		\$5.00 May B Added to Fees	v 1	ake check _l ida Departn	. •		
10.	_		Trust Fund C	. •		Added to Fees	v 1	ida Departn	nent of Si	tate	
TITLE	Due by M	OFFICERS AND DIRE	Trust Fund C	11.		Added to Fees	Flor	ida Departn	nent of Si	tate	
TITLE NAME	Due by M DP WARREN	OFFICERS AND DIRE	Trust Fund C	11. TITLE NAME		Added to Fees	Flor	ida Departn	CTORS IN	tate	
TITLE	DP WARREN, 1300 RIVE	OFFICERS AND DIRE	Trust Fund C	11.	DDRESS	Added to Fees	Flor	ida Departn	CTORS IN	tate	
TITLE NAME STREET ADDRESS	DP WARREN, 1300 RIVE JACKSON SVP	OFFICERS AND DIRE CLEVE ERPLACE BLVD., STE. 1 VILLE, FL 32207	Trust Fund C	11. TITLE NAME STREET A	DDRESS	Added to Fees	Flor	ida Departn	CTORS IN	tate	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplier entitle indicated on t

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Clev<u>e Warren</u>

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Daytime Phone #