

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758845

FILED
Jul 06, 2006
Secretary of State

Entity Name: JACKSONVILLE SYMPHONY ASSOCIATION, INC.

Current Principal Place of Business:

300 W. WATER STREET
STE. 200
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

300 W. WATER STREET
STE. 200
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 59-6002520 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOPPER, ALAN
300 W. WATER ST
STE 200
JACKSONVILLE, FL 32202 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: EDD () Delete
Name: HOPPER, ALAN
Address: 300 W WATER ST., STE 200
City-St-Zip: JACKSONVILLE, FL 32202

Title: C () Delete
Name: HALVERSON, STEVEN T
Address: 111 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 322314100

Title: CE () Delete
Name: POLLACK, GERALD J
Address: 50 N. LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: T () Delete
Name: CONOVER, DAVID
Address: 8211 CYPRESS PLAZA DR, STE 103
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD (X) Delete
Name: SKINNER, HALCYON E
Address: 50 N. LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: POLLACK, GERALD J
Address: 300 W. WATER STREET, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32202

Title: T (X) Change () Addition
Name: HEINZ, JAMES A
Address: 7545 CENTURION PARKWAY, SUITE 206
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD (X) Change () Addition
Name: SKINNER, HALCYON E
Address: 50 N. LAURA STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN HOPPER

EDD

07/06/2006

Electronic Signature of Signing Officer or Director

Date