



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 8:00 am
Secretary of State

01-29-2007 90102 028 ***158.75

DOCUMENT # K34077					
1. Entity Name JACKSONVILLE BLOOD BANK, INC.					
Principal Place of Business 536 W. 10TH STREET JACKSONVILLE, FL 32203 US			Mailing Address 536 W. 10TH ST. JACKSONVILLE, FL 32206		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-0766984	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MALLOY, DALE R 536 W 10TH ST JACKSONVILLE, FL 32206			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and fee if applicable (If J. E. Registered Agent signature required when retaking)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	FOUTS, ROY	NAME	BAILEY JR., JOHN D.		
STREET ADDRESS	2020 DUNA VISTA COURT	STREET ADDRESS	780 N PONCE DE LEON BLVD		
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233	CITY-ST-ZIP	ST. AUGUSTINE, FL 32085		
TITLE	DVC <input type="checkbox"/> Delete	TITLE	DC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VAN NORTWICK, WILLIAM A HR.	NAME	VAN NORTWICK, WILLIAM A HR.		
STREET ADDRESS	1ST DISTRICT ST OF FL., MLK JR. BLVD	STREET ADDRESS	1ST DISTRICT ST OF FL., MLK JR. BLVD		
CITY-ST-ZIP	TALLAHASSEE, FL 323991850	CITY-ST-ZIP	TALLAHASSEE, FL 323991850		
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	MILLER, JEREMY P	NAME	DURVEA, ED		
STREET ADDRESS	806 RIVERSIDE AVE	STREET ADDRESS	3003 RIVERSIDE LN		
CITY-ST-ZIP	JACKSONVILLE, FL 32203	CITY-ST-ZIP	BEAUFORT, SC 29902		
TITLE	DS <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	KNAUER, MARY B	NAME	GOLDMAN, ERIC		
STREET ADDRESS	822 A1A NORTH, SUITE 101	STREET ADDRESS	3625 UNIVERSITY BLVD S		
CITY-ST-ZIP	JACKSONVILLE, FL 32204	CITY-ST-ZIP	JACKSONVILLE, FL 322164240		
TITLE	D <input type="checkbox"/> Delete	TITLE	DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BURNS, WILLIAM S JR.	NAME	BURNS, WILLIAM S. JR.		
STREET ADDRESS	ONE INDEPENDENT DR., STE. 1900	STREET ADDRESS	ONE INDEPENDENT DR., STE. 1900		
CITY-ST-ZIP	JACKSONVILLE, FL 32202	CITY-ST-ZIP	JACKSONVILLE, FL 32202		
TITLE	P <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	MALLOY, DALE R	NAME	MAGUIRE, MICHAEL		
STREET ADDRESS	536 W 10TH ST	STREET ADDRESS	1650 PRUDENTIAL DR STE 101		
CITY-ST-ZIP	JACKSONVILLE, FL 32206	CITY-ST-ZIP	JACKSONVILLE, FL 32207		
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 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 607, 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.					
SIGNATURE: Dale R. Malloy, President				January 26, 2007	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		904-353-8263	

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ATTACHMENT
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MINOR, JOHN G. 501 GLOUCESTER ST, STE 201 BRUNSWICK, GA 31520 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SHUMER, FRANK D. 4490 SOUTHSIDE BLVD JACKSONVILLE, FL 32216 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PERRY, M.D., SHERYL 5548 FAIR LANE DR JACKSONVILLE, FL 32244 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D THREADCRAFT, Ph.D, MILTON H. 3158 SECRET WOODS TRAIL W JACKSONVILLE, FL 32216 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUCKLEY, M.D., JULIE A. 5270 PALM VALLEY RD PONTE VEDRA BEACH, FL 32082 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT MORALES, JORGE F. 1650 PRUDENTIAL DR, SUITE 300 JACKSONVILLE, FL 32207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVC TUCKER III, M.D., N.H. 2149 ST. JOHNS AVE JACKSONVILLE, FL 32204 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIM, EDWARD 800 PRUDENTIAL DR JACKSONVILLE, FL 32207 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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