

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001263

FILED
Apr 29, 2004
Secretary of State

Entity Name: JACKSONVILLE LEARNING INSTITUTE, INC.

Current Principal Place of Business:

521 WEST ASHLEY STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

521 WEST ASHLEY STREET
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-3756292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLT, EDWARD
1208 EAST THIRD STREET
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

HOLT, EDWARD
139 EAST 15TH STREET
JACKSONVILLE, FL 32206 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: EDWARD HOLT

04/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: HOLT, EDWARD
Address: 1208 EAST THIRD STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: VCPV () Delete
Name: HURST, JAMES E ED.D
Address: 4621 SUNSET LANE SOUTH
City-St-Zip: JACKSONVILLE, FL 32257

Title: STD () Delete
Name: RICHARDSON, ROBERT E SR.
Address: 7265 SAN PEDRO ROAD
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: LITTLE, MARC
Address: 8070 WAKEFIELD AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: POWELL, LEOLA
Address: C/O 1880 WEST EDGEWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32208

Title: RS (X) Delete
Name: MORGAN, ROBERT
Address: 6123 OAKWOOD STREET
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: HOLT, EDWARD
Address: 139 EAST 15TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D (X) Change () Addition
Name: FERRO, LUALHATI V
Address: 10060 HIDDEN BRANCH DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32257

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

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

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

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 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 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: EDWARD HOLT

PC

04/29/2004

Electronic Signature of Signing Officer or Director

Date