## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001515

FILED Mar 09, 2004 Secretary of State

Entity Name: JACKSONVILLE MARINE TRANSPORTATION EXCHANGE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3117 TALLEYRAND AVE JACKSONVILLE, FL 32206 **Current Mailing Address: New Mailing Address:** P.O. BOX 350162 JACKSONVILLE, FL 322350162 FEI Number: 59-3705390 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EDENFIELD, EARL E JR 3117 TALLEYRAND AVE JACKSONVILLE, FL 32206 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete DIR () Change () Addition EDENFIELD, EARL E JR Name: Name: Address: 3117 TALLEYRAND AVE Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: DIR ( ) Delete Title: () Change () Addition Name: BROWN, JOSEPH Name: Address: 4910 OCEAN ST Address: City-St-Zip: MAYPORT, FL 32233 City-St-Zip: Title: DIR () Delete Title: () Change () Addition RING, MICHAEL L Name: Name: 5632 CHANNEL VIEW BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: ( ) Delete Title: Title: DIR ( ) Change (X) Addition LEWIS, DONALD S EXECDIR Name: Name: Address: Address: 3117 TALLEYRAND AVE City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32206

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: DONALD S. LEWIS DIR 03/09/2004