2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004
Secretary of State

DOCUMENT# N01000007408

Entity Name: KBJ FOUNDATION INC.

Current Principal Place of Business:

13700 SUTTON PARK DR N.
#111
JACKSONVILLE, FL 32224

New Principal Place of Business:

11 EAST FORSYTH STREET
#308
JACKSONVILLE, FL 32202

Current Mailing Address:

13700 SUTTON PARK DR N.
#111
JACKSONVILLE, FL 32224

New Mailing Address:

11 EAST FORSYTH STREET
#308
JACKSONVILLE, FL 32202

FEI Number: 03-0379415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACKSON, ROBERT E
13700 SUTTON PARK DR N.
SUITE #111
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

JACKSON, ROBERT E
11 EAST FORSYTH STREET
#308
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: _____ 04/09/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: JONES, ROBERT T
Address: 800 LOBLOLLY DR
City-St-Zip: VASS, NC 28394

Title: CPD ( ) Delete
Name: JACKSON, ROBERT E
Address: 13700 SUTTON PARK DR N. #111
City-St-Zip: JACKSONVILLE, FL 32224

Title: S ( ) Delete
Name: JONES, WENDY
Address: 800 LOBLOLLY DR
City-St-Zip: VASS, NC 28394

Title: D ( ) Delete
Name: MESSEA, NANCY
Address: 12136 SHOSHONE TRAIL
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CPD (X) Change ( ) Addition
Name: JACKSON, ROBERT E
Address: 11 EAST FORSYTH STREET, APT.308
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: D (X) Change ( ) Addition
Name: MESSER, NANCY
Address: 12136 SHOSHONE TRAIL
City-St-Zip: JACKSONVILLE, FL 32223

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: ROBERT T. JONES TD 04/09/2004
Electronic Signature of Signing Officer or Director — Date