2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2007
Secretary of State

DOCUMENT# N01000008545

Entity Name: THE CHILDREN'S FOUNDATION OF THE EXCHANGE CLUB OF THE JACKSONVILLE BEACHES, INC.

Current Principal Place of Business:

427 3RD ST N
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

427 3RD ST N
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 30-0027682 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILLEGASS, WILLIAM G
427 3RD ST N
JACKSONVILLE, FL 32250 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: SNEED, JEFF
Address: 113 S. ROSCOE BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: HANSON, JIM
Address: 2239 BAREFOOT TRAIL
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete
Name: BRYAN, CHRIS
Address: 4417 HUNTER HAVEN LANE E
City-St-Zip: JACKSONVILLE, FL 32224

Title: D ( ) Delete
Name: BAER, LAURA
Address: 77 TALLWOOD DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D (X) Delete
Name: SMITH, GLENN
Address: 110 GRENADA LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Delete
Name: MORISON, JACK
Address: 152 ABACO WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BRYAN, CHRIS
Address: 4417 HUNTER HAVEN LANE E
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP (X) Change ( ) Addition
Name: REITER, DEE
Address: 1798 SELVA MARINA DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S (X) Change ( ) Addition
Name: SMITH, GLENN
Address: 219 SOLANO CAY CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T (X) Change ( ) Addition
Name: MORISON, JACK
Address: 152 ABACO WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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 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: WILLIAM G HILLEGASS RA 01/07/2007

Electronic Signature of Signing Officer or Director Date