

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003800

FILED
Jan 06, 2012
Secretary of State

Entity Name: MOODY AUTOMOBILE & ANTIQUES MUSEUM, INC.

Current Principal Place of Business:

945 PALM VALLEY RD
PONTE VEDRA BCH, FL 32082

New Principal Place of Business:

Current Mailing Address:

PO BOX 10114
JACKSONVILLE, FL 32247

New Mailing Address:

FEI Number: 04-3671582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, T. BOYD
945 PALM VALLEY RD
PONTE VEDRA BCH, FL 32082 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
Name: MOODY, T. BOYD
Address: PO BOX 10114
City-St-Zip: JACKSONVILLE, FL 32247

Title: D
Name: ROWLAND, JOHN H III
Address: PO BOX 10114
City-St-Zip: JACKSONVILLE, FL 32247

Title: D
Name: ROWLAND, KAREN L
Address: PO BOX 10114
City-St-Zip: JACKSONVILLE, FL 32247

Title: D
Name: MOODY, M. CHRISTINA
Address: PO BOX 10114
City-St-Zip: JACKSONVILLE, FL 32247

Title: D
Name: BLANKEVOORT, MARJANNE
Address: PO BOX 10114
City-St-Zip: JACKSONVILLE, FL 32247

Title: C
Name: JANSEN, WILLIAM
Address: P.O. BOX 10114
City-St-Zip: JACKSONVILLE, FL 32247

I hereby 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 all other like empowered.

SIGNATURE: T. BOYD MOODY

D

01/06/2012

Electronic Signature of Signing Officer or Director

Date