

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006137

FILED
Apr 10, 2006
Secretary of State

Entity Name: SAFE HOUSE OF JACKSONVILLE INC.

Current Principal Place of Business:

3325-9 PLYMOUTH STREET
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

3325-9 PLYMOUTH STREET
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 42-1546481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOWELL, JOSEPH L SR
6749 BAKERSFIELD DR.
JACKSONVILLE, FL 32210 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: P () Delete
Name: HOWELL, JOSEPH L SR
Address: 6749 BAKERSFIELD DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: S () Delete
Name: JENNINGS, CHRISTINA
Address: 9380 103RD STREET, #253
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: HOWELL, RICHARD
Address: 5785 WILSON BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: V () Delete
Name: HOWELL, LOTTIE
Address: 6749 BAKERSFIELD DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Delete
Name: SANDERS, JUDY E
Address: 4302 PLYMOUTH STREET
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: JENNINGS, CHRISTINA
Address: 5785 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

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 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: JOSEPH HOWELL

P

04/10/2006

Electronic Signature of Signing Officer or Director

Date