2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008114

Entity Name: SHRM JACKSONVILLE, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7611 WEXFORD CLUB DR W. 7617 WEXFORD CLUB DR W. JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

7611 WEXFORD CLUB DR W.
SUITE 710
JACKSONVILLE, FL 32256
JACKSONVILLE, FL 32256

FEI Number: 41-2075812 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:

KITCHEN, F. DAMON ESQ.
7611 WEXFORD CLUB DRIVE WEST
JACKSONVILLE, FL 32256 US
LEIGH, MILLS
7617 WEXFORD CLUB DRIVE WEST
JACKSONVILLE, FL 32256 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: LEIGH MILLS 04/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONAL ADDITIONA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: VD (X) Change () Addition

Name: ROOKS, CYNDI Name: ROBIN, BULLOCK
Address: 7611 WEXFORD CLUB DR, W Address: 7617WEXFORD CLUB DR, W

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: VD () Delete Title: PD (X) Change () Addition Name: LANG, MARIA Name: LANG, MARIA

Address: 7611 WEXFORD CLUB DR. W Address: 7617 WEXFORD CLUB DR. W

Address. 7611 WEXFORD CLOB DR, W Address. 7617 WEXFORD CLOB DR, W City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: TD () Delete Title: TD (X) Change () Addition Name: KITCHEN, F. DAMON Name: MILLS, LEIGH

Address: 7611 WEXFORD CLUB DRIVE WEST Address: 7617 WEXFORD CLUB DRIVE WEST

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify 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: LEIGH MILLS TREA 04/29/2008