

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 30, 2012
Secretary of State

Entity Name: FIRST COAST DIVERSITY COUNCIL, INCORPORATED

Current Principal Place of Business:

4800 DEERWOOD CAMPUS PKWY, DCC-14
DCC 1-4
JACKSONVILLE, FL 32246

New Principal Place of Business:

5022 GATE PARKWAY
C/O ROBERT AUSTIN, PRESIDENT/DEUTSCHE BANK
JACKSONVILLE, FL 32256

Current Mailing Address:

FIRST COAST DIVERSITY COUNCIL INC
P.O. BOX 47712
JACKSONVILLE, FL 322477712

New Mailing Address:

FEI Number: 03-0509448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAINES-BAUMANN, KIMBERLY
5011 GATE PARKWAY
BLDG 200, SUITE 400
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

BAINES-BAUMANN, KIMBERLY
5011 GATE PARKWAY
BLDG 200, SUITE 300
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: KIMBERLY BAINES-BAUMANN

03/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: JENKINS, TONY
Address: 4800 DEERWOOD CAMPUS PKWY. DCC1-4
City-St-Zip: JACKSONVILLE, FL 32246

Title: PD
Name: NORTON, ROBIN
Address: 637 NORTH LEE ST
City-St-Zip: JACKSONVILLE, FL 32204

Title: PD
Name: AUSTIN, ROBERT
Address: 5022 GATE PKWY, STE. 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD
Name: BAINES-BAUMANN, KIMBERLY
Address: 5011 GATE PARKWAY BLDG. 200, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: PD
Name: STANFORD, WALETTE
Address: 21 WEST CHURCH STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: SD
Name: CAMPBELL, FELECIA
Address: 4800 DEERWOOD CAMPUS PKWY. DCC1-4
City-St-Zip: JACKSONVILLE, FL 32246

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: KIMBERLY BAINES-BAUMANN

TD

03/30/2012

Electronic Signature of Signing Officer or Director

Date