2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2011
Secretary of State

DOCUMENT# N03000002597

Entity Name: SPECIAL EVENTS ADVISORY COUNCIL, INC.

Current Principal Place of Business:

117 W DUVAL ST STE 220
JACKSONVILLE, FL 322023700

New Principal Place of Business:

Current Mailing Address:

117 W DUVAL ST STE 220
JACKSONVILLE, FL 322023700

New Mailing Address:

FEI Number: 30-0166229 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERRELL, MARY L
117 W DUVAL ST STE 220
JACKSONVILLE, FL 322023700 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: C
Name: CROZIER, JANET
Address: 117 WEST DUVAL STREET STE 220
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: INGLE, MELINDA
Address: 3455 SAN PABLO ROAD S
City-St-Zip: JACKSONVILLE, FL 32224

Title: D
Name: ANDERSON, SANDI
Address: 333 E. ASHLEY ST.
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: WARD, WILL
Address: 4827 TARA WOODS COURT
City-St-Zip: JACKSONVILLE, FL 32210

Title: T
Name: WOLFSON, NICOLE
Address: 4870 BELFORT ROAD
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: MOSON, MADLEN
Address: 4370 JIGGERMAST AVE
City-St-Zip: JACKSONVILLE, FL 32277

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: JANET CROZIER CH 02/17/2011
Electronic Signature of Signing Officer or Director Date