2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006551

FILED Apr 07, 2008 Secretary of State

Entity Name: FIRST JACKSONVILLE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 124 WEST ASHLEY STREET JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** 124 WEST ASHLEY STREET JACKSONVILLE, FL 32202 FEI Number: 52-2436610 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: SOUD LAW FIRM 233 EAST BAY STREET SUITE L-3 JACKSONVILLE, FL 32202 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DAVIS, JERRY W Name: Name: 8210 BAHIA BLANCA COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: SD Title: () Delete () Change () Addition BRISTOWE, DAVID Name: Name: Address: 2772 FOREST MILL LANE Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: () Delete Title: () Change () Addition HARRISON, ROBERT Name: Name: 6939 SAN JOSE BOULEVARD Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: Title: TD () Delete Title: () Change () Addition HOLMES, LOCKWOOD Name: Name: Address: 4599 ORTEGA ISLAND DRIVE NORTH Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: Title: () Delete Title: () Change () Addition INGOLDSBY, JAMES Name: Name: 505 LANCASTER STREET, APT. #9 A-B Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: Title: () Delete Title: () Change () Addition MILLS R.C. Name: Name: Address: 160 PLANTATION CIRCLE SOUTH Address: PONTE VEDRA BEACH, FL 32082 City-St-Zip: City-St-Zip:

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: JOHN O BLOUNT, III REV 04/07/2008