

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011611

Entity Name: JMOMA PROPERTIES, INC.

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

333 N LAURA ST
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

333 N LAURA ST
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAVEN, JANE C
333 N LAURA ST
JACKSONVILLE, FL 32202 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: T () Delete
Name: GARTNER, INFIELD A
Address: 1660 PRUDENTIAL DR - STE 203
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Delete
Name: BOWER, PETER E
Address: 1301 RIVERPLACE BLVD - STE 2130
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Delete
Name: ALLEN, JOHN J
Address: 7220 FINANCIAL WAY - STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: T () Delete
Name: BAKER, SCOTT
Address: ONE INDEPENDENT DR - STE 2300
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: GARTNER, WINFIELD A
Address: 1660 PRUDENTIAL DR - STE 203
City-St-Zip: JACKSONVILLE, FL 32207

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 Section 119.07(3)(i), 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: WINFIELD A. GARTNER

T

02/11/2005

Electronic Signature of Signing Officer or Director

Date