2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# N06000009029

Entity Name: TIMOTHY JAMES SEAMANS MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

7130 OAKWOOD DRIVE
JACKSONVILLE, FL 32211

New Principal Place of Business:

7130 OAKWOOD DRIVE
JACKSONVILLE, FL 32211 UN

Current Mailing Address:

PO BOX 11293
JACKSONVILLE, FL 32293

New Mailing Address:

FEI Number: 20-5351402 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAW OFFICES OF CURTIS & ASSOCIATES, P.A.
701 MARKET STREET
UNIT 109
ST. AUGUSTINE, FL 32095 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: D, P
Name: SEAMANS, DAVID R
Address: PO BOX 11293
City-St-Zip: JACKSONVILLE, FL 322391293

Title: D, S
Name: SEAMANS, MONICA J
Address: PO BOX 11293
City-St-Zip: JACKSONVILLE, FL 322391293

Title: D VP
Name: SEAMANS, ASHLEY M
Address: PO BOX 11293
City-St-Zip: JACKSONVILLE, FL 322391293

Title: T
Name: GUTCHER, JOANNE
Address: PO BOX 11293
City-St-Zip: JACKSONVILLE, FL 322391293

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: DAVID R. SEAMANS D.P 04/26/2012

Electronic Signature of Signing Officer or Director Date