

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06416

FILED
Mar 11, 2010
Secretary of State

Entity Name: GEORGE M. COHEN FOUNDATION, INC.

Current Principal Place of Business:

8265 BAYBERRY ROAD
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

8265 BAYBERRY ROAD
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 59-2469069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULL, DAVID J
225 W. WATER ST
SUITE 1800
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: PTD
Name: MUNRO WILSON, CAROLYN
Address: 8265 BAYBERRY ROAD
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: WILSON, DAVID MUNRO
Address: 4615 ASTRAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: SD
Name: HULL, DAVID J
Address: 225 W. WALTER ST., SUITE 1800
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: LUNSFORD, TRAVIS
Address: 4153 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: WEST, JESSICA N
Address: 8265 BAYBERRY RD
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: RUDDER, KATIE D
Address: 1650 PARRISH PLACE
City-St-Zip: JACKSONVILLE, FL 32205

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: CAROLYN MUNRO WILSON

PRES

03/11/2010

Electronic Signature of Signing Officer or Director

Date