2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009585

FILED Jan 20, 2009 Secretary of State

Entity Name: PLANNED GIVING COUNCIL OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 121 W. FORSYTH ST., SUITE 900 JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** 121 W. FORSYTH ST., SUITE 900 JACKSONVILLE, FL 32202 FEI Number: 56-2662173 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: COKER, JEAN C ESQ 6622 SOUTHPOINT DR. SOUTH, SUITE 160 JACKSONVILLE, FL 322160998 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 ANDERSON, MARION Name: Name: 3590 UNIVERSITY BLVD. SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: () Delete Title: (X) Change () Addition BORDELON, SHERYL Name: ROBERTS, BOB Name: Address: 8160 BAYMEADOWS WAY WEST, SUITE 310 Address: 121 WEST FORSYTH STREET, SUITE 900 City-St-Zip: JACKSONVILLE, FL 322567447 City-St-Zip: JACKSONVILLE, FL 32202 Title: () Delete Title: (X) Change () Addition HERRIN, JUDY STONE, MARY ANN Name: Name: 3311 PINE ST., APT. 4 1350 13TH AVE SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE BEACH, FL 32250 Title: D () Delete Title: (X) Change () Addition LIVINGSTON, BERT Name: HUNTER, NINA Name: 7077 BONNEVAL ROAD, SUITE 200 Address: 1 UNF DR. Address: JACKSONVILLE, FL 32224 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32216 Title: (X) Delete Title: () Change () Addition LIVINGSTON, BERT Name: Name: 7077 BONNEVAL RD., SUITE 200 Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: (X) Delete Title: () Change () Addition MCCOLLUM, BRENDA Name: Name: Address: 1230 HENDRICKS AVE Address: JACKSONVILLE, FL 322078695 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: BERT H. LIVINGSTON TRES 01/20/2009