## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000011825

Entity Name: JACKSONVILLE LEAN CONSORTIUM INC.

FILED Feb 05, 2008 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

4215 SOUTHPOINT BLVD. 4110 SOUTHPOINT BLVD. SUITE 216

JACKSONVILLE, FL 32216 SUITE 216

JACKSONVILLE, FL 32216

**Current Mailing Address:** New Mailing Address:

4215 SOUTHPOINT BLVD 4110 SOUTHPOINT BLVD. JACKSONVILLE, FL 32216 SUITE 216

JACKSONVILLE, FL 32216

FEI Number: 26-1472429 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:

REGISTERED AGENTS LEGAL SERVICES, LLC 155 OFFICE PLAZA, SUITE A TALLAHASSEE, FL 32301

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 (X) Change ( ) Addition

RIZZO, JOSEPH E RIZZO, JOSEPH E Name: Name: 4110 SOUTHPOINT BLVD. SUITE 216 Address:

4215 SOUTHPOINT BLVD. Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: Title: (X) Change ( ) Addition ( ) Delete

RUSSELL, RANDY Name: RUSSELL, RANDY Name:

Address: 4215 SOUTHPOINT BLVD. Address: 4110 SOUTHPOINT BLVD. SUITE 216

City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: () Delete Title: (X) Change ( ) Addition

BUSSELL, JERRY BUSSELL, JERRY Name: Name: 4215 SOUTHPOINT BLVD. 4110 SOUTHPOINT BLVD. SUITE 216 Address:

Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

( ) Delete (X) Change ( ) Addition Title: Title: TS

DESIDERIO, AMY Name: DESIDERIO, AMY Name:

4215 SOUTHPOINT BLVD. 4110 SOUTHPOINT BLVD. SUITE 216 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: () Delete Title: (X) Change ( ) Addition

GOLDEN, DEAN GOLDEN, DEAN Name: Name: 4110 SOUTHPOINT BLVD. SUITE 216 4215 SOUTHPOINT BLVD. Address: Address:

City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

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: DANIELLE G. FILICHIA OM 02/05/2008