2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2012
Secretary of State

DOCUMENT# N08000011176

Entity Name: JACKSONVILLE ALLIANCE FOR KIPP SCHOOLS, INC.

Current Principal Place of Business:

ONE INDEPENDENT DR., SUITE 1600
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

ONE INDEPENDENT DR., SUITE 1600
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 26-4046824 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE SUITE 1300
JACKSONVILLE, FL 322025017 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
Name: BAKER, THOMPSON S II
Address: 503 PONTE VEDRA BLVD.
City-St-Zip: PONTE VEDRA, FL 32082 US

Title: DCHP
Name: GERVIN, SYDNEY A
Address: ONE INDEPENDENT DRIVE - SUITE 1600
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: DST
Name: GIBBS, THOMAS
Address: 50 N. LAURA STREET SUITE 2800
City-St-Zip: JACKSONVILLE, FL 32203 US

Title: D
Name: COLYER, ROBERT
Address: 2121 PARK STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: D
Name: KUNTZ, WILLIAM E
Address: 4744 PRINCE EDWARD RD.
City-St-Zip: JACKSONVILLE, FL 32210 US

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: TOM MAJDANICS EXD 02/28/2012

Electronic Signature of Signing Officer or Director Date