## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000011178

Entity Name: KIPP JACKSONVILLE, INC.

FILED Feb 25, 2010 Secretary of State

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

7010 GAINES CT 501 RIVERSIDE AVENUE JACKSONVILLE, FL 32217

SUITE 500

JACKSONVILLE, FL 32202

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

501 RIVERSIDE AVENUE 7010 GAINES CT JACKSONVILLE, FL 32217

SUITE 500

JACKSONVILLE, FL 32202

FEI Number: 26-4046741 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:

F&L CORP ONE INDEPENDENT DR., SUITE 1300 JACKSONVILLE, FL 322025017 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:** 

D/CH

BAKER, II, JOHN Name: Address: 1870 CHALLEN AVE

City-St-Zip: JACKSONVILLE, FL 32205 US

Title:

Name: CHARTRAND, GARY R Address: 139 PONTE VEDRA BLVD

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title:

AUSTIN, CYNTHIA Name:

3971 MISSION HILLS DR. E. Address: City-St-Zip: JACKSONVILLE, FL 32225 US

Title:

Name: OWENS, GREGORY Address: 4873 JAYBIRD CIRCLE N. City-St-Zip: JACKSONVILLE, FL 32257

Title:

VANCE, JANE Name: 7010 GAINES CT. Address: JACKSONVILLE, FL 32217 City-St-Zip:

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: JOHN D. BAKER II DCH 02/25/2010