

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 28, 2012
Secretary of State

Entity Name: KIPP JACKSONVILLE, INC.

Current Principal Place of Business:

1440 MCDUFF AVENUE NORTH
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

1440 MCDUFF AVENUE NORTH
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 26-4046741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DR., 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/CH
Name: BAKER, II, JOHN
Address: 1870 CHALLEN AVE
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: D
Name: CHARTRAND, GARY R
Address: 139 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: D
Name: AUSTIN, CYNTHIA
Address: 3971 MISSION HILLS DR. E.
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: D
Name: FULLWOOD, LATASHA
Address: 50 N. LAURA STREET, STE 3500
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: D
Name: EDELMAN, DAN
Address: 6622 SOUTHPPOINT DR, STE 495
City-St-Zip: JACKSONVILLE, FL 32216

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