

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000769

FILED
Mar 21, 2012
Secretary of State

Entity Name: THE MISSING LINK OF JACKSONVILLE, INC.

Current Principal Place of Business:

501 EAST BAY STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 43482
JACKSONVILLE, FL 322033482

New Mailing Address:

FEI Number: 80-0434940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCHANAN, MARLA K ESQ.
1301 RIVERPLACE BLVD., SUITE 1500
JACKSONVILLE, FL 32207 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: VP
Name: GRACE, VANESSA
Address: P.O. BOX 43482
City-St-Zip: JACKSONVILLE, FL 322033482

Title: S
Name: MASON, NANCY
Address: P.O. BOX 43482
City-St-Zip: JACKSONVILLE, FL 322033482

Title: P
Name: WELCKER, DANA
Address: P.O. BOX 43482
City-St-Zip: JACKSONVILLE, FL 322033482

Title: T
Name: HOUSTON, CINDY
Address: P.O. BOX 43482
City-St-Zip: JACKSONVILLE, FL 322033482

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: CINDY HOUSTON

T

03/21/2012

Electronic Signature of Signing Officer or Director

Date