2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09378

FILED Aug 19, 2009 Secretary of State

Entity Name: JACKSONVILLE MARITIME MUSEUM SOCIETY, INC.

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

1015 MUSEUM CIRCLE UNIT 2

JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

% ROBERT B PARRISH
501 W BAY ST
JACKSONVILLE, FL 32202

% WILLIAM SANDBERG
1160 GIRVIN RD
JACKSONVILLE, FL 32225

FEI Number: 59-2605102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PARRISH, ROBERT B SANDBERG, WILLIAM C 501 W BAY ST 1015 MUSEUM CIRCLE

JACKSONVILLE, FL 32202 US UNIT 2
JACKSONVILLE, FL 32207 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: WILLIAM C SANDBERG 08/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PARRISH, ROBERT
 Name:
 PARRISH, ROBERT

 Address:
 501 W BAY ST
 Address:
 501 W BAY ST

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

Title: TREA () Delete Title: () Change () Addition

 Name:
 SANDBERG, WILLIAM C
 Name:

 Address:
 1015 MUSEUM CIRCLE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:

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: WILLIAM C SANDBERG TREA 08/19/2009

Electronic Signature of Signing Officer or Director

Date