

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 24, 2006 8:00 am
Secretary of State

01-24-2006 90013 013 ****61.25

DOCUMENT # N12488

1. Entity Name

JORDAN AND SHIRLEY ANSBACHER FAMILY
FOUNDATION, INC.



Principal Place of Business

3733 W. UNIVERSITY BLVD.
SUITE 115-A
JACKSONVILLE FL 32217
US

Mailing Address

3733 W. UNIVERSITY BLVD.
SUITE 115-A
JACKSONVILLE FL 32217
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2610694

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHNEIDER, MICHAEL N.
5150 BELFORT RD
BLDG 100
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name JORDAN ANSBACHER
Street Address (P.O. Box Number is Not Acceptable) 3733 W. UNIVERSITY BLVD #115A
City JACKSONVILLE FL Zip Code 32217

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, hand or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ANSBACHER, JORDAN
STREET ADDRESS 2359 SEGOVIA AVENUE
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ Delete
NAME ANSBACHER, BRIAN
STREET ADDRESS 3352 S. MAIDEN VOYAGE CIR
CITY-ST-ZIP JACKSONVILLE FL

TITLE STD ☐ Delete
NAME ANSBACHER, SHIRLEY
STREET ADDRESS 2359 SEGOVIA AVENUE
CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☐ Delete
NAME COHEN, MICHELE
STREET ADDRESS 2361 PLAYERS POND LANE
CITY-ST-ZIP HERNDON VA

TITLE D ☐ Delete
NAME HELMING, DONNA
STREET ADDRESS 2988 BERNICE DRIVE
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jordan Ansbacher

1/17/06 (904) 733-1202