2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2009
Secretary of State

DOCUMENT# N17217

Entity Name: JACKSONVILLE REEF RESEARCH TEAM, INC.

Current Principal Place of Business:

1655 THE GREEN'S WAY #3422
JACKSONVILLE, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

1655 THE GREEN'S WAY #3422
JACKSONVILLE, FL 32250 US

New Mailing Address:

FEI Number: 59-2889442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSEN, JAMES D
8558 ROYAL LAKES DRIVE
JACKSONVILLE, FL 322568455 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	( ) Delete
Name:	PERKNER, JOHN	
Address:	36 JACKSON AVENUE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	D	( ) Delete
Name:	DAVIS, JAMES	
Address:	100 CONCH CT	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	PD	( ) Delete
Name:	WILCOX, SUE	
Address:	1655 THE GREEN'S WAY #3422	
City-St-Zip:	JACKSONVILLE, FL 32250 US	
Title:	SD	( ) Delete
Name:	HUGHES, DENISE	
Address:	7623 BAYMEADOWS CIR W #2032	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	VPD	( ) Delete
Name:	LINDHOLM, BILL	
Address:	8181 SUTTON PL. N.	
City-St-Zip:	JACKSONVILLE, FL 32217	
Title:	TD	( ) Delete
Name:	LINDHOLM, BILL	
Address:	8181 SUTTON PL. N.	
City-St-Zip:	JACKSONVILLE, FL 32217	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: BILL LINDHOLM TD 01/11/2009
Electronic Signature of Signing Officer or Director — Date