

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20049

FILED
Feb 02, 2006
Secretary of State

Entity Name: SCENIC JACKSONVILLE, INC.

Current Principal Place of Business:

C/O WILLIAM D. BRINTON
1301 RIVERPLACE BLVD, SUITE 1500
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM D. BRINTON
1301 RIVERPLACE BLVD, SUITE 1500
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINTON, WILLIAM D
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: PD () Delete
Name: INGHAM, LINDA C
Address: 4165 ROMA BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: VD () Delete
Name: GASSETT, S. WILLIAM,
Address: 11120 W. RIVER CREEK DR.
City-St-Zip: JACKSONVILLE, FL 32217

Title: STD () Delete
Name: BRINTON, WILLIAM D.,
Address: 1835 CHALLENGE AVE.
City-St-Zip: JACKSONVILLE, FL 32205

Title: V () Delete
Name: CRESCIMBENI, JOHN
Address: 5735 DICKSON ROAD
City-St-Zip: JACKSONVILLE, FL 32211

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 D. BRINTON

STD

02/02/2006

Electronic Signature of Signing Officer or Director

_____ Date