

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21711

FILED
Jan 12, 2006
Secretary of State

Entity Name: FLORIDA ROCK & TANK LINES FOUNDATION, INC.

Current Principal Place of Business:

1801 ART MUSEUM DRIVE
SUITE 300
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

1801 ART MUSEUM DRIVE
SUITE 300
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-2143326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN LANDINGHAM, RAY M
1801 ART MUSEUM DRIVE
SUITE 300
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: BAKER, EDWARD L.,
Address: 155 E 21ST STREET
City-St-Zip: JACKSONVILLE, FL

Title: ST () Delete
Name: VAN LANDINHAM, RAY M
Address: 1801 ART MUSEUM DRIVE, STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: DV () Delete
Name: ANDERSON, JOHN E.
Address: 1801 ART MUSEUM DRIVE, STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: MABBETT, JOHN R III
Address: 1801 ART MEUSEUM DR.
City-St-Zip: JACKSONVILLE, FL 32207

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: RAY M. VAN LANDINGHAM

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01/12/2006

Electronic Signature of Signing Officer or Director

Date