2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22398

Apr 15, 2009 Secretary of State

Entity Name: CONCERNED TAXPAYERS OF DUVAL COUNTY, INC.

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

5044 ANDREWS STREET JACKSONVILLE, FL 32254 LIS

Current Mailing Address: New Mailing Address:

P. O. BOX 2307

JACKSONVILLE, FL 32202 US

FEI Number: 59-2843693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WINKLER, JOHN S 2515 OAK STREET

JACKSONVILLE, FL 32204 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:

City-St-Zip:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete TREA (X) Change () Addition

JOSEPH, ANDREWS TREAS. ANDREWS, JOSEPH Name: Name:

POB 2307 Address: POB 2307 Address:

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

Title: Title: SEC (X) Change () Addition () Delete

HUNT, JEFF Name: WOLF, CURTIS Name: Address: POB 2307 Address: POB 2307

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

Title: PRES Title: PRES (X) Change () Addition () Delete

BATES, TONY WINKLER, JOHN S Name: Name:

Address: 5044 ANDREWS STREET Address: 2515 OAK STREET City-St-Zip: JACKSONVILLE, FL 32254 City-St-Zip: JACKSONVILLE, FL 32204 US

() Delete Title: VΡ Title: (X) Change () Addition

FISCHER, JASON Name: JENSEN, J J Name: POB 2307 POB 2307 Address: Address:

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

VΡ Title: () Delete Title: (X) Change () Addition

WINKLER, JOHN MORRILL, ROD Name: Name:

2515 OAK STREET POB 2307 Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32204 US

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

MAC NAUGHTON, SCOTT DRAPER, JOHN Name: Name:

Address: POB 2307 Address: POB 2307

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 US City-St-Zip: 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: JOHN S. WINKLER Ρ 04/15/2009