

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24387

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** JACKSONVILLE INTERNATIONAL LONGSHOREMEN'S ASSOCIATION RETIREE'S INC.

**Current Principal Place of Business:**

EASTSIDE COMMUNITY  
JACKSONVILLE, FL 32206 US

**New Principal Place of Business:**

**Current Mailing Address:**

7819 MATTOX AVE  
JACKSONVILLE, FL 32219 US

**New Mailing Address:**

FEI Number: 59-2910138

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIBSON, PERTY E  
7819 MATTOX AVE  
JACKSONVILLE, FL 32219 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: P  
Name: GIBSON, PERTY E  
Address: 7819 MATTOX AVE  
City-St-Zip: JACKSONVILLE, FL 32219

Title: VP  
Name: WHITE, SAM  
Address: 1710 OAKHURST AVENUE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: FS  
Name: CUMMING, JOSEPH M  
Address: 6309 JAMMES ROAD  
City-St-Zip: JACKSONVILLE, FL 32244

I hereby 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 all other like empowered.

SIGNATURE: PERTY E. GIBSON

P

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date