FILED

| DOCUMENT # N32109 1. Entity Name | | | | | Mar 14, 2001 8:00 am Secretary of State | | | |
|---|--|--|---------------------------------------|--|---|-----------------------------------|---------------------------|--|
| THE TR | AFFIC CLUB OF JACKSONVI | LLE, INC. | | | 03-14-2001 90486 | | | |
| Principal Place PO BOX 9147 JACKSONVILL | ce of Business E FL 32206 | Mailing Address PO 20X 947 JACKSON VILLE FL 32200 | • | | | | | |
| , . | LINE 7. | SEE LINE 7 | | 1 1401120 | 188 (188 (1881 (1881 1881) 1882 (1882 (1882 | 61812 82831 81821 818 | I (| |
| 1715 H Suite, Apt. | Place of Business COCOS BIVO. #, etc. # 2303 | 3. Mailing Address T15 HOOLOGS Suite, Apt. #, ets AD1 # 3303 | Blud. | | DO NOT WRITE IN TH | B18() B(B)(218() B) | [| |
| City & Stat | e . | City & State | > FI | 4. FE! Numbe | ⁵ 59-6152371 | | plied For t Applicable | |
| 3 3 3 | Country USA6. Name and Address of Current | 3300H | Country | | of Status Desired | \$8.75 Add Fee Required | | |
| 5800 WILI | ON, VIVIAN LIAM MILLS STREET IVILLE FL 32226 | negratio eu Agenti- | Name Street A | Frances | Williams er is Not Acceptable) Ap | 17.64 | 33 | |
| 8. The above | rnamed entity submits this statement for FRANCES WILLIA Signature, typed or printed name of registered agent | M5 (ST) | rance | r registered agent, or bot | th, in the state of Florida. DAT | E | | |
| FILE NOW: 9. Election Campaign Finan Trust Fund Contribution. | | | | \$5.00 May Be Added to Fees | | | | |
| 10. | OFFICERS AND DIF | RECTORS | 11. | ADDITIONS/CH | ANGES TO OFFICERS AND | DIRECTORS IN | 10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST PATTERRSON, VIVIAN 4811 BEACH BLVD STE 404 JACKSONVILLE FL 32207 | Delete | NAME | 5T FRANCES WIL 1715 HOOGES TYCKERSYUN | LIANG BNO.AD+ 336 2.FL 30004 | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SHULTZ, WILLIAM 3404 CLIFFORD LANE JACKSONVILLE FL 32209 | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BRUCE PETERS 4337 COMAN | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP FOLLADORI, JAY 4057 CARMICHAEL AVENUE JACKSONVILLE FL 32207 | ⊠ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP KENDRA TANK 13123 Premiu | XER - | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D YOW, CHARLES 720 SCOTIAL ROAD JACKSONVILLE FL 32254 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP Charles You 130 Scotia Jacksonvil | Road | ⊠ Change | ☐ Addition | |
| TITLE NAME Street address City-St-Zip | D ALICE LIVINGSTON PO BOX 3005 N/A JACKSONVILLE FL | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Sel atto | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PAULKUMP P.O. BOX 363 200KSOWING | 33000 | ☐ Change | Addition | |

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

#N32109 130591

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| · · · · · · · · · · · · · · · · · · · | - |
| From | |
| Art Jones (D) | D |
| | <u>Henry mooneyhan</u> |
| | 4600 walgreen Road |
| | Jacksonville, FL 3009 |
| | |
| Frances Williams (D) | D |
| | stana Carter |
| | 13410 Sutton Park Dr. S. |
| | 4th Floor |
| | Jacksonville, FL 32224 |
| | |
| tubert Hawarth (D) | D. |
| | Greg Will |
| | 21 west Church St. T-7 |
| | Jacksonville, FL 32202 |
| | |
| James Barry (D) | D |
| | matt Justice-Steinman |
| | 7075 west 10th st. |
| | Jacksonville, FL 32220 |
| | |