

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40080

FILED
Mar 04, 2008
Secretary of State

Entity Name: INTERNATIONAL VISITOR CORPS OF JACKSONVILLE, INC.

Current Principal Place of Business:

4077 WOODCOCK DR
SUITE 100
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

4077 WOODCOCK DR
SUITE 100
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-3032070 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRUS, SONDRAL
4077 WOODCOCK DRIVE
STE 100
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: VP () Delete
Name: BANYAS, WAINE
Address: 111 SOLANA RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP () Delete
Name: MARKLEY, CRYSTAL
Address: 6113 PARK STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: P () Delete
Name: LEWIS, HAROLD
Address: 1012 EAGLE POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: TREA () Delete
Name: SEPEHRI, MOHAMAD
Address: 8084 PINE LAKE RD.
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Delete
Name: EMILY, KATHY
Address: 109 SOUTHBRIDGE WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SECR () Delete
Name: D'ALISERA, LAURA
Address: 11874 CLEARWATER OAKS
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: GRANT, ROBERT
Address: 1319 RIVER CT.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TREA (X) Change () Addition
Name: JOHNSON, KEITH
Address: 1351 ALDERMAN RD. E.
City-St-Zip: JACKSONVILLE, FL 32211

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: NELMS, PATRICIA
Address: 786 GINGER MILL DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

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: SONDRAL L. FRUS

RA

03/04/2008

Electronic Signature of Signing Officer or Director

_____ Date