

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Mar 27, 2012
Secretary of State**

DOCUMENT# N43461

Entity Name: DANIEL MEMORIAL, INC.

Current Principal Place of Business:4203 SOUTHPOINT BLVD.
JACKSONVILLE, FL 32216**New Principal Place of Business:****Current Mailing Address:**4203 SOUTHPOINT BLVD.
JACKSONVILLE, FL 32216**New Mailing Address:**

FEI Number: 59-3067752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:CLARK, JAMES D PRES
4203 SOUTHPOINT BLVD.
JACKSONVILLE, FL 32216 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: TREA
Name: PEAVEY, JAMES JR
Address: 4203 SOUTHPOINT BLVD.
City-St-Zip: JACKSONVILLE, FL 32216Title: CFO
Name: OTT, DARRYL
Address: 4203 SOUTHPOINT BLVD
City-St-Zip: JACKSONVILLE, FL 32216Title: CHR
Name: KLARNER, DAVID
Address: 4203 SOUTHPOINT BLVD
City-St-Zip: JACKSONVILLE, FL 32216Title: PRES
Name: CLARK, JAMES D
Address: 4203 SOUTHPOINT BLVD
City-St-Zip: JACKSONVILLE, FL 32216Title: SECT
Name: WATERS, THOMAS
Address: 4203 SOUTHPOINT BLVD
City-St-Zip: JACKSONVILLE, FL 32216Title: VP
Name: WELLS, LESLEY A
Address: 4203 SOUTHPOINT BLVD
City-St-Zip: JACKSONVILLE, FL 32216

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: DARRYL OTT

CFO

03/27/2012

Electronic Signature of Signing Officer or Director

Date