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FILED

Jan 22 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000001676 (6)

1. Corporation Name

FOURTH JUDICIAL CIRCUIT CITIZENS REVIEW ADVISORY
BOARD, INC.

Principal Place of Business

Mailing Address

333 EAST BAY ST.
JACKSONVILLE FL 32202333 EAST BAY ST.
JACKSONVILLE FL 32202-29083. Date Incorporated or Qualified
04/14/19933a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
59-3201304Applied For
Not Applicable

22

27

City & State

City & State

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

23

28

Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PITTMAN, JEANNE R
333 EAST BAY ST.
JACKSONVILLE FL 32202

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME PATE, DOROTHY H
STREET ADDRESS 333 EAST BAY ST.
CITY-ST-ZIP JACKSONVILLE FL 322021.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Tischler, Marion
1.3 STREET ADDRESS 333 East Bay St.
1.4 CITY-ST-ZIP Jacksonville, FL. 32202TITLE VD ☒ DELETE
NAME COLEMAN, HELENE
STREET ADDRESS 333 EAST BAY ST.
CITY-ST-ZIP JACKSONVILLE FL 322022.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME Jones, Arhiel
2.3 STREET ADDRESS 333 East Bay St.
2.4 CITY-ST-ZIP Jacksonville, FL. 32202TITLE SD ☒ DELETE
NAME TISCHLER, MARION
STREET ADDRESS 333 E BAY ST
CITY-ST-ZIP JACKSONVILLE FL 322023.1 TITLE SD ☒ Change ☐ Addition
3.2 NAME Lammerding, Jane
3.3 STREET ADDRESS 333 East Bay St.
3.4 CITY-ST-ZIP Jacksonville, FL. 32202TITLE M ☐ DELETE
NAME PITTMAN, JEANNE R
STREET ADDRESS 333 EAST BAY ST.
CITY-ST-ZIP JACKSONVILLE FL 322024.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE TD ☒ DELETE
NAME BRANDVOLD, THOMAS
STREET ADDRESS 333 EAST BAY ST.
CITY-ST-ZIP JACKSONVILLE FL 322025.1 TITLE TD ☒ Change ☐ Addition
5.2 NAME Moorhead, Gregory
5.3 STREET ADDRESS 333 East Bay St.
5.4 CITY-ST-ZIP Jacksonville, FL. 32202TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jeanne R. Pittman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 004130

CR2E037 (9/96)