## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001106

FILED Jan 05, 2007 Secretary of State

Entity Name: JUNIOR ACHIEVEMENT OF FLORIDA'S FIRST COAST, INC.

Current Principal Place of Business: New Principal Place of Business:

4049 WOODCOCK DR. SUITE 200

JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

4049 WOODCOCK DR. SUITE 200

JACKSONVILLE, FL 32207 US

FEI Number: 59-1021800 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ST.AMAND, STEVE ST.AMAND, STEVE 4049 WOODCOCK DR.

STE 101 SUITE 200

JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32207 US

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: 01/05/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DC () Delete Title: DC (X) Change () Addition

Name: KOCH, WILLIAM Name: CAMERON, DON

Address: 245 RIVERSIDE AVENUE SUITE 100 Address: 50 NORTH LAURA STREET, SUITE 3000

City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

Title: DT () Delete Title: DT (X) Change () Addition

Name: DELAPARTE, CINDY Name: EDWARDS, JEFF
Address: 11100 SAN JOSE BOUELVARD Address: 1741 WEST BEAVER STREET

City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32209

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition Name: JEFF, EDWARDS Name: BEARD, MURRAY

Address: 1741 WEST BEAVER STREET Address: 200 WEST FORSYTH STREET, SUITE 200

City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32202

Title: P () Delete Title: P (X) Change () Addition

Name: STAMAND, STEVE Name: STAMAND, STEVE

Address: 1801 ART MUSEUM DRIVE, SUITE #101 Address: 4049 WOODCOCK DRIVE, SUITE 200

City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE ST. AMAND P 01/05/2007