

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008 8:00 am
Secretary of State

03-04-2008 90013 015 ****61.25

DOCUMENT # N94000005747

1. Entity Name
THE MCCURRY FOUNDATION, INC.



Principal Place of Business
11645 BEACH BLVD.
SUITE 200
JACKSONVILLE, FL 32246 US

Mailing Address
11645 BEACH BLVD.
SUITE 200
JACKSONVILLE, FL 32246 US

40051100



01082008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3287752
Applied For
Not Applicable

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

2. Principal Place of Business - No P.O. Box #
4417 BEACH BLVD

3. Mailing Address
SAME

Suite, Apt. #, etc.
SUITE 200

Suite, Apt. #, etc.

City & State
JACKSONVILLE FL

City & State

Zip 32207 Country US

Zip Country

6. Name and Address of Current Registered Agent

STEFANSEN, PAMELA S
11645 BEACH BLVD.
SUITE 200
JACKSONVILLE, FL 32246

7. Name and Address of New Registered Agent

Name

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

4417 BEACH BLVD. STE 200

City JACKSONVILLE

FL

Zip Code 32207

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Pamela S. Stefansen
Signature, typed or printed name of registered agent and title if applicable.

PAMELA S. STEFANSEN

2/15/08

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PDS	☐ Delete
NAME	STEFANSEN, PAMELA S	
STREET ADDRESS	11645 BEACH BLVD., SUITE 200	
CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE	D	☒ Delete
NAME	MOSS, FRANCES M	
STREET ADDRESS	11645 BEACH BLVD., SUITE 200	
CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE	VD	☒ Delete
NAME	MICKLER, ROBERT D	
STREET ADDRESS	11645 BEACH BLVD., SUITE 200	
CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE	VDAS	☐ Delete
NAME	LANEY, KELLY E	
STREET ADDRESS	11645 BEACH BLVD., SUITE 200	
CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE	D	☐ Delete
NAME	POPE, RICHARD J	
STREET ADDRESS	11645 BEACH BLVD., SUITE 200	
CITY-ST-ZIP	JACKSONVILLE, FL 32246	
TITLE	D	☐ Delete
NAME	MCCURRY, III, EDGAR W	
STREET ADDRESS	11645 BEACH BLVD., SUITE 200	
CITY-ST-ZIP	JACKSONVILLE, FL 32246	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Change ☐ Addition
NAME	PAMELA S. STEFANSEN	
STREET ADDRESS	4417 BEACH BLVD STE. 200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	VPSD	☐ Change ☒ Addition
NAME	BRADFORD, SHERYL P.	
STREET ADDRESS	4417 BEACH BLVD. STE. 200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	D	☐ Change ☒ Addition
NAME	ELLIOTT, CHARLES	
STREET ADDRESS	4417 BEACH BLVD. STE 200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	VDAS	☒ Change ☐ Addition
NAME	LANEY, KELLY E.	
STREET ADDRESS	4417 BEACH BLVD STE. 200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	D	☒ Change ☐ Addition
NAME	POPE RICHARD J.	
STREET ADDRESS	4417 BEACH BLVD. STE 200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	VPP	☒ Change ☒ Addition
NAME	MCCURRY III EDGAR W.	
STREET ADDRESS	4417 BEACH BLVD. STE. 200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Pamela S. Stefansen PAMELA S. STEFANSEN 2/15/08 (904)398-6036

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #