2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005002

FILED Feb 03, 2006 Secretary of State

Entity Name: JACKSONVILLE INTERNATIONAL AIRPORT ARTS COMMISSION, INC.

Current Principal Place of Business: New Principal Place of Business: 14201 PECAN PARK RD JACKSONVILLE, FL 32218 **Current Mailing Address: New Mailing Address:** P.O. BOX 18018 JACKSONVILLE, FL 32229 FEI Number: 59-3350022 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: JORDAN, FAITH 14201 PÉCAN PARK RD. JACKSONVILLE, FL 32218 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WARD, JEANNE Name: Name: Address: 3523 PARK STREET Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: Title: () Delete Title: () Change () Addition CORNELIUS, PEGGY Name: Name: Address: 71 19TH STREET Address: City-St-Zip: ATLANTIC BEACH, FL 32233 City-St-Zip: Title: () Delete Title: () Change () Addition WHITE, ROBERT Name: Name: 11 EAST FORSYTH ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip:

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: JEANNE WARD/ FAITH JORDAN P 02/03/2006