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NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

1996

DOCUMENT # N9500005933 (5)

THE JACKSONVILLE ZOOLOGICAL FOUNDATION, INC.

Principal Place of Business Mailing Address 8605 ZOO ROAD 8805 200 ROAD JACKSONVILLE FL 32218-5799 JACKSONVILLE FL 32218-5799 3. Date Incorporated or Qualified 3a. Date of Last Report 12/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number X Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Yes 🗌 No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B**1 Name Richard L. Parker TUTTLE, C. DALE Street Address (P.O. Box Number is Not Acceptable) 8605 Zoo Road 82 8605 ZOO ROAD JACKSONVILLE FL 32218-5799 83 84 City Zip Code 32218 Jacksonville 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 egent, 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. (NOTE Registered Agent signature :12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change X Addition C MITCHELL, JOHN A III NAME 1.2 NAME 225 WATER STREET, 11TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32202 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE CE Change 21 TITLE Addition MILLER, FRANK E NAME 2.2 NAME 200 W. FORSYTH STREET, SUITE 1400 STREET ADDRESS 2 3 STREET ADDRESS JACKSONVILLE FL 32254 CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE VC [1] Change X Addition DAVIS, A. DANO NAME 3.2 NAME 5050 EDGEWOOD COURT STREET ADDRESS 33 STREET ADDRESS JACKSONVILLE FL 32254 CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change X Addition PETWAY, ELIZABETH D NAME PETWAY, ELIZABETH P. 4 2 NAME 3809 DUVAL DRIVE STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP 44 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition S JONES, CARLTON D NAME 5.2 NAME **600 WHARFSIDE WAY** STREET ADDRESS 5.3 STREET ADDRESS JACKSONVILLE FL 32207 DITY-ST-ZIP 5 4 DITY - ST - ZIP TITLE DELETE 61 TITLE Change X Addition SPENCER, RICHARD C. F NAME 62 NAME **50 N. LAURA STREET** STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I furting 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.

6.4 CITY - ST - ZIP

SIGNATURE: ___

CITY - ST - ZIP

JACKSONVILLE FL 32202

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

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904-361-3350

(12/95)

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