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FILED
May 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000005933 (5)**

1. Corporation Name

THE JACKSONVILLE ZOOLOGICAL FOUNDATION, INC.

Principal Place of Business

Mailing Address

**8605 ZOO ROAD
JACKSONVILLE FL 32218-5799**

**8605 ZOO ROAD
JACKSONVILLE FL 32218-5769**



3. Date Incorporated or Qualified
12/18/1995

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 8605 ZOO PARKWAY

26 8605 ZOO PARKWAY

4. FEI Number

Applied For

59-1319010

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23 JACKSONVILLE, FL

28 JACKSONVILLE, FL

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24 32218

25 U.S.

29 32218

30 U.S.

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

PARKER, RICHARD L

**8605 ZOO ROAD
JACKSONVILLE FL 32218-5799**

81 Name

C. DOUGLAS PAGE, DVM

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

8605 ZOO PARKWAY

83

84 City

JACKSONVILLE

FL

85 Zip Code

32218

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

C Douglas Page, DVM
Signature, typed or printed name of registered agent and title if applicable.

C Douglas Page, DVM Executive Director 4/24/97
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**DC
MITCHELL, JOHN A III
225 WATER STREET, 11TH FLOOR
JACKSONVILLE FL 32202**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

**DCE
MILLER, FRANK E
200 W. FORSYTH STREET, SUITE 1400
JACKSONVILLE FL 32254**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

**DVC
DAVIS, A. DANO
5050 EDGEWOOD COURT
JACKSONVILLE FL 32254**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

**DVC
PETWAY, ELIZABETH P
3809 DUVAL DRIVE
JACKSONVILLE BEACH FL 32250**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

**DS
JONES, CARLTON D
600 WHARF SIDE WAY
JACKSONVILLE FL 32207**

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

**DT
SPENCER, RICHARD C. F
50 N. LAURA STREET
JACKSONVILLE FL 32202**

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

J. A. Mitchell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-97

Date

(904) 361-3350
Daytime Phone #0006782

CR2E037 (9/96)