## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000003027

FILED Feb 09, 2012 Secretary of State

Entity Name: GOODWILL ENDOWMENT, INC.

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

4527 LENOX AVE

JACKSONVILLE, FL 32205

**Current Mailing Address: New Mailing Address:** 

4527 LENNOX AVE 4527 LENOX AVE

JACKSONVILLE, FL 32205 US JACKSONVILLE, FL 32205

FEI Number: 59-3387329 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROBERT, THAYER 4527 LENOX AVE.

JACKSONVILLE, FL 32205 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:

Date

Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:** 

HENSON, CURTIS Name:

Address: 50 NORTH LAURA ST. SUITE 3700 City-St-Zip: JACKSONVILLE, FL 32202

Title: SCD

Name: GARWOOD, DAVID Address: 415 PABLO AVE. SUITE 100

City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: SCD

EASTLAND, ERIC Name:

6735 SOUTHPOINT DR, J784 Address: City-St-Zip: JACKSONVILLE, FL 32216

Title: SCD

Name: HANSEN, KIRK

2393 OCEAN BREEZE CT Address: City-St-Zip: ATLANTIC BEACH, FL 32233

Title:

THAYER, ROBERT H Name: 4527 LENOX AVE. Address: JACKSONVILLE, FL 32205 City-St-Zip:

Title:

GRAY, PAIGE Name: Address: 4527 LENOX AVE.

JACKSONVILLE, FL 32205 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: PAIGE GRAY **CFO** 02/09/2012