FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

Principal Place of Business

N96000003288 (5)

Mailing Address

JACKSONVILLE FIRE MUSEUM SOCIETY, INC.

107 MARKET STREET JACKSONVILLE FL 32202		107 MARKET STREET JACKSONVILLE FL 32202						
					3. Date Incorporated or Qualified 06/19/1996	3a. Date of L	ast Report	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	L	Applied For	
21		26			59-3389665	59 - 3389665 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional	
22		27			or Commodic of Clares Courses	F	e Required	
City & State		⊢ ′	City & State		6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution	·····	Ided to Fees	
Zip	Country	Zıp	Country	/	8. This corporation has liability for intangible tax under s. 199.032,			
24 25 29			30					
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent 81 Name			
			"	INATIFE	•			
PEAVY, JOHN W M. 107 MARKET STREET			62	Street Address (P.O. Box Number is Not Acceptable)				
	ONVILLE FL 32202		63					
			84	City		FL 85	Zip Code	
44 Durguant	to the provinces of Costions 617.060	22 and 617 1609 Florida Stat	utos the shou	0.0000	d acrossition subsettle this statement for the		in a 100 marintaria	
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.								
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE .	Planet up to and as project come of conjectured as	ant and title if annihophia	OTE: Decisioned As		re required when reinstating)	DATE		
Signature, typed or profed name of registered agent and title if applicable. (NOTE: Regist 12. OFFICERS AND DIRECTORS 1.				ent signatui	ADDITIONS/CHANGES TO OFFIC		TORS IN 12	
TITLE	D	DELETE	1.1 TITLE		7.65/116/16/61/21/166-01/16	Chi		
NAME	PEAVY, JOHN M		1.2 NAME			L	ings risonisti	
STREET ADDRESS	107 MARKET STREET		1	ADDRESS			*	
CITY-ST-ZIP	JACKSONVILLE FL 32202							
TITLE	D	DELETE	1.4 CITY - S 2.1 TITLE	51 - LIP		☐ Cha	nge	
NAME	•	C PECCIE	2.1 HILE 2.2 NAME				NAC TINDOUNI	
	DOOLITTLE, WAYNE L	,						
STREET ADDRESS	13941 HUNTERWOOD ROAD	,	2.3 STREE					
CITY-ST-ZIP	JACKSONVILLE FL 32225	DELETE	2. 4 CITY -	ST-ZIP		T I ch	ngo Maddition	
TITLE	D DADDAG TED	☐ nereik	3.1 TITLE		Ţ.	☐ Cha	inge	
NAME	PAPPAS, TED		3.2 NAME					
STREET ADDRESS	100 RIVERSIDE AVENUE		3.3 STREET					
CITY - ST - ZIP	JACKSONVILLE FL 32202	☐ DELETE	3.4. CITY-	ST-ZIP		710	and I have	
TITLE		□ NEUE IE	4.1 TITLE		·	∐ Cha	inge 🔲 Addition	
NAME			4. 2 NAME				- 1	
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Cha	inge 🔲 Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Cha	nge 🔲 Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
					1			

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:

John M.