

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006552

FILED  
Jan 24, 2009  
Secretary of State

**Entity Name:** THE GERALD L. NICHOLS AND JACQUELINE W. NICHOLS FOUNDATION, INC.

**Current Principal Place of Business:**

4548 MUNDY RD.  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

4548 MUNDY RD.  
JACKSONVILLE, FL 32207 US

**New Mailing Address:**

**FEI Number:** 59-3415830

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUNTER, KATHRYN  
1989 SELVA MARINA DR  
ATLANTIC BEACH, FL 32204 US

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

GUNTER, KATHRYN N  
1989 SELVA MARINA DR  
ATLANTIC BEACH, FL 32233 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: KATHRYN N. GUNTER

01/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: NICHOLS, GERALD  
Address: 4548 MUNDY RD.  
City-St-Zip: JACKSONVILLE, FL

Title: TD ( ) Delete  
Name: NICHOLS, JACQUELINE  
Address: 4548 MUNDY RD.  
City-St-Zip: JACKSONVILLE, FL

Title: DS ( ) Delete  
Name: GUNTER, KATHRYN  
Address: 1989 SELVA MARINA DR.  
City-St-Zip: ATLANTIC BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GERALD L. NICHOLS

PRES

01/24/2009

Electronic Signature of Signing Officer or Director

Date