

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004975

FILED
Apr 09, 2012
Secretary of State

Entity Name: ST. JOHNS RIVERKEEPER, INC.

Current Principal Place of Business:

2800 UNIVERSITY BLVD. NORTH
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

2800 UNIVERSITY BLVD. NORTH
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-3611338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTH, JIMMY C JR
2800 UNIVERSITY BLVD., N
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TREA
Name: BALL, CHRISTOPHER
Address: 1649 OSCEOLA STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: CHAR
Name: SETZER, REXFORD
Address: 4305 VENETIA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: BLANCHARD, DONALD
Address: 301 2ND STREET
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SEC
Name: RAGSDALE, JOHN
Address: 2039 BISHOP ESTATES ROAD
City-St-Zip: FRUIT COVE, FL 32259

Title: D
Name: WILLIAMS, BEN
Address: 11610 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32223

Title: VCHA
Name: BUSEY, BROOKS
Address: 4669 ROOSEVELT BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

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: REXFORD SETZER

CHA

04/09/2012

Electronic Signature of Signing Officer or Director

Date