2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006794

Entity Name: PRESERVATION PROJECT JACKSONVILLE, INC.

Apr 21, 2004 Secretary of State

117 WEST DUVAL STREET

1200 RIVERPLACE BLVD. SUITE 902

SUITE 400

JACKSONVILLE, FL 32202 **Current Mailing Address:**

JACKSONVILLE, FL 32207

New Mailing Address:

117 WEST DUVAL STREET

1200 RIVERPLACE BLVD.

SUITE 400 JACKSONVILLE, FL 32202 SUITE 902

JACKSONVILLE, FL 32207

FEI Number: 59-3614354

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:

CHASTAIN, KAREN M 117 WEST DUVAL ST

MIDDLEBROOK, MARK 21 SAILFISH DRIVE

STE 480 JACKSONVILLE, FL 32202 US PONTE VEDRA BEACH, FL 32082 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: MARK MIDDLEBROOK

04/21/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DVP () Delete

MORAN, AUDREY Name:

117 WEST DUVAL STREET SUITE 400 Address:

City-St-Zip: JACKSONVILLE, FL 32202

Title: () Delete

DELANEY, JOHN Name:

Address: 117 WEST DUVAL STREET SUITE 400

City-St-Zip: JACKSONVILLE, FL 32202

Title: () Delete

SHUMAN, SHARI Name:

117 WEST DUVAL STREET SUITE 400 Address:

City-St-Zip: JACKSONVILLE, FL 32202

Title: DVP () Delete Name: MIDDLEBROOK, MARK 117 WEST DUVAL ST STE.,#400 Address:

City-St-Zip: JACKSONVILLE, FL 32202

Title: DS () Delete MULLANEY, RICHARD Name: 117 WEST DUVAL ST STE.,#400 Address:

City-St-Zip: JACKSONVILLE, FL 32202 (X) Change () Addition

ANDERSON, WARREN Name: Address: 2029 N 3RD STREET

City-St-Zip: JACKSONVILLE BEACH, FL 32205

Title: (X) Change () Addition

Name: DELANEY, JOHN

Address: 4567 ST. JOHNS BLUFF ROAD City-St-Zip: JACKSONVILLE, FL 32224

Title: (X) Change () Addition

Name: SHUMAN, SHARI

4567 ST. JOHNS BLUFF ROAD Address: City-St-Zip: JACKSONVILLE, FL 32224

Title: (X) Change () Addition

WILES, SUSAN Name:

117 WEST DUVAL ST STE.,#400 Address: City-St-Zip: JACKSONVILLE, FL 32202

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSAN WILES D 04/21/2004