

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90134 022 ***150.00

0022329 AV

DOCUMENT # PQ0000114883

1. Entity Name
NAVIGY HOLDINGS, INC.



Principal Place of Business
**4800 DEERWOOD CAMPUS PAKWY
BLDG 100 7TH FLOOR
JACKSONVILLE FL 32246-8273**

Mailing Address
**50 N. LAURA STREET
SUITE 2800
JACKSONVILLE FL 32202**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3688054**

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JOLLY, AREZOU C
4800 DEERWOOD CAMPUS PAKWY
BLDG 100 7TH FLOOR
JACKSONVILLE FL 32246-8273**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC GRANTHAM, L. JOSEPH 4800 DEERWOOD CAMPUS PAKWY JACKSONVILLE FL 32246	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STAMATOIANNAKI, NICKLAS E 4800 DEERWOOD CAMPUS PAKWY JACKSONVILLE FL 32246	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOLLY, AREZOU C 4800 DEERWOOD CAMPUS PAKWY JACKSONVILLE FL 32246	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WALL, ROBERT 4800 DEERWOOD CAMPUS PAKWY JACKSONVILLE FL 32246	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SCHWENNSSEN, WILLIAM A 4800 DEERWOOD CAMPUS PAKWY JACKSONVILLE FL 32246	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOERR, R. CHRIS 4800 DEERWOOD CAMPUS PAKWY JACKSONVILLE FL 32246	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director (Vice-Chairperson) and Chief Executive Officer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Arezou Jolly*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-03 (904) 905-6024
Date Daytime Phone #

CR2E034 (10/02)

ATTACHMENT
P00000114883

10098179

**NAMES AND ADDRESSES OF ADDITIONAL
DIRECTORS AND OFFICERS**

DIRECTOR

ADDRESS

Michael Cascone, Jr., Chairperson

4800 Deerwood Campus Parkway
Jacksonville, Florida 32246-8273

Bruce N. Bagni

4800 Deerwood Campus Parkway
Jacksonville, Florida 32246-8273

Dr. Robert Lufrano

4800 Deerwood Campus Parkway
Jacksonville, Florida 32246-8273

OFFICER

ADDRESS

Jill M. Gleeson, President/Chief Operating Officer

4800 Deerwood Campus Parkway
Jacksonville, Florida 32246-8273