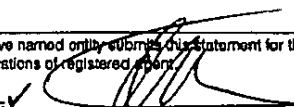


2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
06 MAY 31 PM 3:00

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # P04000156187					
1. Entity Name JACKSONVILLE MIDTOWN MANAGEMENT, INC.					
Principal Place of Business 3947 BOULEVARD CENTER DRIVE SUITE 5 JACKSONVILLE, FL 32207			Mailing Address 3947 BOULEVARD CENTER DRIVE SUITE 5 JACKSONVILLE, FL 32207		
2. Principal Place of Business 3333 S. ORANGE AVE. Suite, Apt. #, etc. SUITE 200			3. Mailing Address P. O. Box 568821 Suite, Apt. #, etc.		
City & State ORLANDO, FL		City & State ORLANDO, FL		4. FEI Number 20-1884384	
Zip 32806-8500	Country US	Zip 32856-8821	Country US	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KELLOGG, ROGER W 3947 BOULEVARD CENTER DRIVE SUITE 5 JACKSONVILLE, FL 32207			7. Name and Address of New Registered Agent Name CARTER, DARYL M. Street Address (P.O. Box Number is Not Acceptable) 3333 S. ORANGE AVE., SUITE 200 City ORLANDO FL Zip Code 32806		
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 		DARYL M. CARTER		DATE 4/28/06	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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	D KELLOGG, ROGER W 3947 BOULEVARD CENTER DRIVE, STE 5 JACKSONVILLE, FL 32207 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARTER, DARYL M. 3333 S. ORANGE AVE., SUITE 200 ORLANDO, FL 32806-8500 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST MITCHELL, JOHN. C., II 399 CAROLINA AVENUE WINTER PARK, FL 32789 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTER, MAURY L. 3333 S. ORANGE AVE., SUITE 200 ORLANDO, FL 32806-8500 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 assignee 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 to this address, with all other like empowered.					
SIGNATURE: 		DARYL M. CARTER PRESIDENT		DATE 4/28/06 407-422-3144	