2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000073799

Entity Name: THE ART INSTITUTE OF JACKSONVILLE, INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
210 SIXTH	TION MANAGEMENT CORPORATION I AVE, 33RD FLOOR RGH, PA 15222			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
210 SIXTH	TION MANAGEMENT CORPORATION I AVE, 33RD FLOOR RGH, PA 15222			
FEI Number:	: 20-5076129 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
1201 HAYS	ATION SERVICE COMPANY S STREET SSEE, FL 32301 US			
	named entity submits this statement for the of Florida.	ne purpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered	Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete PUFAHL, JOHN 8775 BAYPINE ROAD JACKSONVILLE, FL 32256	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete KRAMER, J. DEVITT 210 SIXTH AVE 33RD PL PITTSBURGH, PA 15222	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete PANNOZZO, DORINDA 210 SIXTH AVE PITTSBURGH, PA 15222	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS () Delete MINAHAN, SUE 210 SIXTH AVE PITTSBURGH, PA 15222	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MCKERMAN, JR., JOHN 210 SIXTH AVE PITTSBURGH, PA 15222	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WEST, EDWARD H 210 SIXTH AVE PITTSBURGH, PA 15222	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUE MINAHAN AS 03/04/2009