## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000018194

Entity Name: RAX CO.

FILED Apr 20, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

50 N. LAURA STREET 50 N. LAURA STREET SUITE 3400 SUITE 3300

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

PO BOX 4099

JACKSONVILLE, FL 32201

FEI Number: 59-3265983 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:

SKINNER, HALCYON E
50 N. LAURA STREET
3300 BARNETT CENTER
JACKSONVILLE, FL 32202 US
SKINNER, HALCYON E
50 N. LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202 US

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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: 04/20/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: F

Name: SKINNER, HALCYON E

Address: 50 N. LAURA STREET, SUITE 3300 City-St-Zip: JACKSONVILLE, FL 32202

Title: V

Name: KEEFE, KENNETH M JR

Address: 50 N. LAURA STREET, SUITE 3300 City-St-Zip: JACKSONVILLE, FL 32202

Title: V

Name: THANNER, CHRISTOPHER J

Address: 50 NORTH LAURA STREET, SUITE 3300

City-St-Zip: JACKSONVILLE, FL 32202

Title: V

Name: CAMPBELL, JASON E

Address: 50 N. LAURA STREET, SUITE 3300 City-St-Zip: JACKSONVILLE, FL 32202

Title: V

Name: HENDERSON, SHARON R

Address: 50 NORTH LAURA STREET, SUITE 3300

City-St-Zip: JACKSONVILLE, FL 32202

Title: V

Name: CAIRNS, SCOTT S

Address: 50 N. LAURA STREET, SUITE 3300 City-St-Zip: JACKSONVILLE, FL 32202

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

SIGNATURE: HALCYON E. SKINNER P 04/20/2010