2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711535

Entity Name: SHANDS JACKSONVILLE PROPERTIES, INC.

FILED
Apr 22, 2025
Secretary of State
2276200360CC

Current Principal Place of Business:

655 WEST 8TH STREET JACKSONVILLE. FL 32209

Current Mailing Address:

655 WEST 8TH STREET JACKSONVILLE, FL 32209

FEI Number: 59-1158241 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEBARDELEBEN, JON ESQ. 655 WEST 8TH STREET JACKSONVILLE, FL 32209 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: JON DEBARDELEBEN 04/22/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

| Title | SECRETARY | Title | DIRECTOR, CHAIRMAN |
|-----------------|------------------------|-----------------|------------------------|
| Name | DEBARDELEBEN, JON ESQ. | Name | GREEN, PATRICK L FACHE |
| Address | 655 WEST 8TH STREET | Address | 655 WEST 8TH STREET |
| City-State-Zip: | JACKSONVILLE FL 32209 | City-State-Zip: | JACKSONVILLE FL 32209 |
| Title | DIRECTOR, PRESIDENT | Title | DIRECTOR, TREASURER |
| Title | DIRECTOR, PRESIDENT | THIC | DIRECTOR, TREAGURER |
| Name | MILLER, GREG | Name | COCCHI, DEAN |

NameMILLER, GREGNameCOCCHI, DEANAddress655 WEST 8TH STREETAddress655 WEST 8TH STREET

City-State-Zip: JACKSONVILLE FL 32209

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

SIGNATURE: JON DEBARDELEBEN

SECRETARY

04/22/2025