

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002591

Entity Name: JACKSONVILLE ARBORETUM & BOTANICAL GARDENS, INC.**Current Principal Place of Business:**1445 MILLCOE RD.
JACKSONVILLE, FL 32225**Current Mailing Address:**1445 MILLCOE RD.
JACKSONVILLE, FL 32225 US**FEI Number:** 20-1061861**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WHITTINGTON, RON P
3 MILLIE DR.
JACKSONVILLE, FL 32250 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:** RONALD P. WHITTINGTON

01/27/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SIMMONS, MELINDA P. PHD
Address 215 BEACH AVENUE
City-State-Zip: ATLANTIC BEACH FL 32233

Title DIRECTOR, SECRETARY
Name LEWELLEN, ANNE
Address 1156 CREEKS RIDGE ROAD,
City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR
Name BURR, JOHN
Address 1208 CAMPBELL CIRCLE
City-State-Zip: JACKSONVILLE FL 32207

Title MEMBER
Name WHITTINGTON, RONALD P.
Address 3 MILLIE DR
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR
Name POLLAN, ADINA
Address 2262 MYRA STREET
City-State-Zip: JACKSONVILLE FL 32204

Title BOARD PRESIDENT
Name BLALOCK, KEVIN
Address 13925 WHITE HERON PLACE
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name SCOTT, DEAN
Address 4275 MORENA LANE
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name STARNER, LINDSAY
Address 5106 IMPERIAL COVE ROAD
City-State-Zip: JACKSONVILLE FL 32210

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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: RONALD P. WHITTINGTON**MEMBER**

01/27/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCNALLY, ANDREA
Address 3375 BRACHENBURY LANE
City-State-Zip: JACKSONVILLE FL 32225

Title TREASURER
Name ROBINSON, ADAM
Address 12970 SPICEBERRY DRIVE
City-State-Zip: JACKSONVILLE FL 32246

Title EXECUTIVE DIRECTOR
Name DOODY, DANA
Address 1445 MILLCOE RD.
City-State-Zip: JACKSONVILLE FL 32225