**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 30, 2019**
**Secretary of State**
**9444583614CC**

DOCUMENT# N09000010732

**Entity Name:** MATTHEW W. GILBERT GRAND ALUMNI, INC.

**Current Principal Place of Business:**

MATTHEW W. GILBERT GRAND ALUMNI, INC.
POST OFFICE BOX 41325
JACKSONVILLE, FL 32203-1325

**Current Mailing Address:**

POST OFFICE BOX 41325
JACKSONVILLE, FL 32203-1325 US

**FEI Number: 27-0733332**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MANUEL, KENNETH L
1816 WOODLEIGH DRIVE WEST
JACKSONVILLE, FL 32211-4955 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:

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | |
|---|---|
| Title | CHAIRMAN |
| Name | CLARK, BEVERLY |
| Address | 542 WEST 18TH STREET |
| City-State-Zip: | JACKSONVILLE FL 32206-2724 |

| | |
|---|---|
| Title | VICE CHAIRMAN OF CORPORATE AFFAIRS |
| Name | MANUEL, KENNETH L. |
| Address | 1816 WOODLEIGH DRIVE WEST |
| City-State-Zip: | JACKSONVILLE FL 32211-4955 |

| | |
|---|---|
| Title | TREASURER |
| Name | FLOWERS, GERALD T. |
| Address | POST OFFICE BOX 40572 |
| City-State-Zip: | JACKSONVILLE FL 32203-0572 |

| | |
|---|---|
| Title | BUSINESS MANAGER |
| Name | SHIELDS, BEVERLY E. |
| Address | 1111 VAN BUREN STREET |
| City-State-Zip: | JACKSONVILLE FL 32206-5233 |

| | |
|---|---|
| Title | VICE CHAIRMAN OF OPERATIONS |
| Name | WEEKS, RONALD L. |
| Address | POST OFFICE BOX # 9995 |
| City-State-Zip: | JACKSONVILLE FL 32208-9995 |

| | |
|---|---|
| Title | SECRETARY |
| Name | GIBBS, CYNTHIA R. |
| Address | 5035 ARROWSMITH ROAD |
| City-State-Zip: | JACKSONVILLE FL 32208-1095 |

| | |
|---|---|
| Title | FINANCIAL SECRETARY |
| Name | JACKSON, ELAINE F. |
| Address | 11411 WOODSONG LOOP, S. |
| City-State-Zip: | JACKSONVILLE FL 32225-1032 |

| | |
|---|---|
| Title | CHAPLAIN |
| Name | MANNING, HAROLD SR. |
| Address | 2824 BELAIR ROAD, N. |
| City-State-Zip: | JACKSONVILLE FL 32207-4406 |

**Continues on page 2**

*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: JOHNNIE MCCRAY SARGENTS AT ARMS 04/30/2019

Electronic Signature of Signing Officer/Director Detail — Date

**Officer/Director Detail Continued :**

| | |
|---|---|
| Title | ASSISTANT SECRETARY |
| Name | SHIELDS, BEVERLY E. |
| Address | 1111 VAN BUREN STREET |
| City-State-Zip: | JACKSONVILLE FL 32206-5233 |

| | |
|---|---|
| Title | SARGENT AT ARMS |
| Name | MCCRAY, JOHNNIE |
| Address | 2908 RIBAULT CIRCLE |
| City-State-Zip: | JACKSONVILLE FL 32208-2430 |

| | |
|---|---|
| Title | PARLIAMENTARIAN |
| Name | BROWN, LULA |
| Address | 6916 CHAMPLAIN ROAD |
| City-State-Zip: | JACKSONVILLE FL 32208-2421 |