

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706981

FILED  
Aug 22, 2009  
Secretary of State

Entity Name: ANNIE MATTOX RECREATION CENTER, INC.

**Current Principal Place of Business:**

901 NE CENTER AVENUE  
LAKE CITY, FL 32055 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1721  
LAKE CITY, FL 32056 US

**New Mailing Address:**

FEI Number: 59-1757148      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PEARSON, LILLIE M  
729 EAST LEON STREET  
LAKE CITY, FL 32055 US

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

GEORGE, LEROY J  
2675 S W STATE ROAD 247  
LAKE CITY, FL 32024 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: LEROY J GEORGE

08/22/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TT ( ) Delete  
Name: WINTONS, MELVIN  
Address: 174 SE DOVER CT  
City-St-Zip: LAKE CITY, FL 32055

Title: T ( ) Delete  
Name: JONES, FRED  
Address: 1022 SW CR 242A  
City-St-Zip: LAKE CITY, FL 32025

Title: T ( ) Delete  
Name: PEARSON, LILLIE MAE  
Address: 729 EAST LEON STREET  
City-St-Zip: LAKE CITY, FL 32055

Title: P ( ) Delete  
Name: GEORGE, LEROY  
Address: 2675 S.W. STATE ROAD #247  
City-St-Zip: LAKE CITY, FL 32024

Title: T ( ) Delete  
Name: WILLIAMSON, NELO  
Address: 237 PATTERSON STREET  
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete  
Name: WILLIAMS, MARY  
Address: 790 NW SPRINGDALE LN  
City-St-Zip: LAKE CITY, FL 32055

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: LEWIS, GROVER  
Address: 119 N W HOLTON COURT  
City-St-Zip: LAKE CITY, FL 32055

Title: T (X) Change ( ) Addition  
Name: GEORGE, LEROY  
Address: 2675 S.W. STATE ROAD #247  
City-St-Zip: LAKE CITY, FL 32024

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: GROVER A LEWIS

P

08/22/2009

Electronic Signature of Signing Officer or Director

Date