2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 27, 2007 Secretary of State DOCUMENT# N07117

Entity Name: JACKSONVILLE MARINE ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

8940 SAN JOSE BLVD. JACKSONVILLE, FL 32257

JACKSONVILLE, FL 32211 **Current Mailing Address:**

1405 CARLOTTA ROAD, WEST

%JOHN T. LOWE

New Mailing Address:

%JOHN T. LOWE 8940 SAN JOSE BLVD. 1405 CARLOTTA ROAD, WEST JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32211

FEI Number: 59-1109509 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:

LOWE, JOHN T. VOLPE, BAJALIA, WICKES, ROGERSON & WACHS 501 RIVERSIDE AVE., 7TH FLOOR 1405 CARLOTTA ROAD, WEST JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32202

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: LESLIE A. WICKES 06/27/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition LYMAN, HASKELL PURCELL, GARY Name: Name: 53 ARLINGTON RD Address: 6407 BLANDING BLVD. Address:

City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32210

Title: SD () Delete Title: (X) Change () Addition GALLUP, MELINDA L Name: EVANS, DON Name:

Address: 3850 MEEK DR Address: 14539 BEACH BLVD. City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32250

Title: () Delete Title: SEVP (X) Change () Addition BLUME, RON CASSEL, GEORGE Name: Name:

8940 SAN JOSE BLVD. Address: 9211 N. MAIN ST Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32257

(X) Change () Addition Title: VΡ () Delete Title: ROCHESTER, WILLARD Name: Name: MURPHY, MONTY

3108 US HIGHWAY 17 SOUTH Address: 6810 US 1 Address:

City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: ORANGE PARK, FL 32003

Title: (X) Delete Title: () Change () Addition

MAMAHON, TODD Name: Name: 8725 ARLINGTON EXPWY Address: Address: City-St-Zip: JACKSONVILLE, FL 32211 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: GEORGE CASSEL **SEVP** 06/27/2007

Electronic Signature of Signing Officer or Director

Date