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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N14768**

1. Corporation Name
TIMUCUA POP WARNER FOOTBALL CONFERENCE, INC.

Principal Place of Business	Mailing Address
12707 N.W. C.R. 231 GAINESVILLE FL 32609 US	12707 N.W. C.R. 231 GAINESVILLE FL 32609 US

2. Principal Place of Business	2a. Mailing Address
21 626 S.W. 4th St.	26 P.O. box 490
22 Suite, Apt. #, etc.	27 Station 24
23 City & State: Gainesville FL. U.S.	28 City & State: Gainesville, FL. U.S.
24 Zip: 32601 25 Country: U.S.	29 Zip: 32602 30 Country: U.S.

3. Date Incorporated or Qualifed: 05/06/1986

4. FEI Number: 11-0602442 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

HUNTER, DAVID
12707 N.W. C.R. 231
GAINESVILLE FL 32609

10. Name and Address of New Registered Agent

81 Name: Lana Jackson
82 Street Address (P.O. Box Number is Not Acceptable): 626 S.W. 4th St.
83 Gainesville, Fl. 32601
84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: L. Lana Jackson PD — Lana L. Jackson — 2.24.99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HUNTER, DAVID 12707 N.W. C.R. 231 GAINESVILLE FL 32609	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	~~Lana Jackson~~ PD Lana Jackson 626 S.W. 4th St. Gainesville, FL. 32601	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JACKSON, LANA 1028 N.E. 14TH STREET GAINESVILLE FL 32602	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	~~Ed DeWitt~~ VD Ed DeWitt 10830 N. Shady Hills Pt. Dunnellon, FL. 34433	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BARGIEL, DANE 1894 W. UNION STREET HERNANDO FL 34442	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HUNTER, DEBRA 12707 NW CR 231 GAINESVILLE FL 32609	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	SD Gary Judd 3450 E. Cindt Ln. Inverness, FL. 34453	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lana Jackson SIGNATURE REQUIRED Lana L. Jackson — 2.24.99 — (352)344-2305
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #