

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007207

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** CHILDREN'S CHRISTMAS PARTY OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

825 TEMPLETON TERRACE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

825 MAPLETON TERRACE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

825 TEMPLETON TERRACE  
JACKSONVILLE, FL 32207

**New Mailing Address:**

P.O. BOX 5338  
JACKSONVILLE, FL 32247

FEI Number: 59-3611757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HALVERSON, DIANE  
825 TEMPLETON TERRACE  
JACKSONVILLE, FL 32207 US

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

HALVERSON, DIANE  
825 MAPLETON TERRACE  
JACKSONVILLE, FL 32207 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: \_\_\_\_\_

03/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: STOREY, R. TRAVIS  
Address: 2217 MILLER OAKS DR NORTH  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D  
Name: STOREY, MARGARET  
Address: 2217 MILLER OAKS DR NORTH  
City-St-Zip: JACKSONVILLE, FL 32217

Title: D  
Name: PALMER, ERIC  
Address: 4500 SAN PABLO ROAD  
City-St-Zip: JACKSONVILLE, FL 32224

Title: C  
Name: HARVEY, PAMELA  
Address: 14690 STARRATT CREEK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: D  
Name: MARTIN, BOBBY  
Address: ONE RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32202

Title: T  
Name: ROSE, CINDY  
Address: 11624 FALLING LEAF TRAIL  
City-St-Zip: JACKSONVILLE, FL 32258

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: DIANE HALVERSON

CEO

03/04/2010

Electronic Signature of Signing Officer or Director

Date