2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25416

1. Entity Name



FILED
Mar 25, 2003 8:00 am
Secretary of State
03-25-2003 90076 023 ****61.25

NORTHEA	ST FLORIDA ASTRONOMICA	AL SOCIETY INC.								
Principal Place of Business P.O. BOX 5432 JACKSONVILLE FL 32247-5432		Mailing Address P.O. BOX 5432 JACKSONVILLE FL 32247-5432								
		To Nation Address								
2. Principal P	lace of Business	3. Mailing Address				UOI DIIII DEBUL EIDID DIEFULBEI 11:				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			.	CHECK HERE IF MAKIN	G CHANGES			
City & State		City & State			4. FEI Number 5	4. FEI Number 59-2558825			Applied For Not Applicable	
Zip Country		Zip Co		5. Certificate of Statu		tatus Desired	\$8.75 Add			
	6. Name and Address of Current	t Registered Agent			7. Name and Add	7. Name and Address of New Registered Agent				
				Name DAVID KNIGHTON						
NAGY, AL	- Bon Rose Dr.	Street Address			dress (P.O. Box Number is 19 SOUTH'S DE BU	Not Acceptable)			_	
	IVILLE FL 32258		-	~12		′				
			-	City TA	CKSONVILLE	FI	Zip Code			
8. The above	named entity submits this statement f	or the purpose of changing its r	egistere			the State of Florida. I am	familiar with,	and accept		
the obligat	ions of registered agent.					2/20	1.0			
SIGNATURE .	Dun lefter	DAV			WIGHTON	3/00/	03			
	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered	Agent signatur	e required when reinstating)	DATE				
ı	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	_		\$5.00 May Be Added to Fees	Make Chec Florida Depa	ck Payable rtment of S			
10.	OFFICERS AND D	IRECTORS	11.			SES TO OFFICERS AND D			<u>.</u>	
TITLE	PD	∑ Delete	TITLE	i i	PRESIDENT DAVID KNIGHTON		Change	Addition	10/02	
NAME STREET ADDRESS	NAGY, AL 5662 RIBBON ROSE DR		NAME STREE	ET ADDRESS	2939 SOUTHSIDE	BWD			77 (1	
CITY-ST-ZIP	JACKSONVILLE FL 32258			ST-ZIP	TACKSONVILLE, F	FL 39916			SEC	
TITLE	VSD	Delete	TITLE	1	VICE PRESIDENT MIKE RAMIREZ		☐ Change	X Addition	Ġ	
NAME STREET ADDRESS	KNIGHTON, DAVID 5149 METCALF RD		NAME	ET ADDRESS	11942 HAR	MONY DR.	• .	{		
CITY-ST-ZIP	JACKSONVILLE FL 32244			·ST-ZiP	JACKSONULL	LE FL 322	46			
TITLE	TD	Delete	TITLE		TREASURER K. SK	LAR	☐ Change	Addition		
NAME STREET ADDRESS	RACKLEY, ERIC 8787 SOUTHSIDE BLVD.		NAMI STRE	ET ADDRESS	3686 LUMBER	JACK CIR. S.		}		
CITY-ST-ZIP	JACKSONVILLE FL 32256		CITY	-ST-ZIP	Jacksohville	FL-32223	<u></u>			
TITLE		☐ Delete	TITLE		EDUCATION DIRECT	CTOR	Change	Addition		
NAME STREET ADDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , ,	NAMI	ET ADDRESS	HOLES HUNKINGTON	forest Blud.				
CITY-ST-ZIP				-ST-ZIP	Jackson Lille	FL 30257				
TITLE		☐ Delete	TITLE		SELPETARY DAVE CUMMING		☐ Change	Addition		
NAME			NAMI STRE	E Et address	1477 Holly OAK	is Lake Rd. W				
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	JACKSONVIlle,	FL 32225				
TITLE		☐ Delete	TITLE		PUBLICITY DIREC	TOR	☐ Change	Addition		
NAME			NAMI	E Et address	GEOKGE HARTS	horn Ave	•			
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	Jacksonville	FL, 322	O.G.			
	L certify that the information supplied wi	th this filing does not qualify for	the exe	mption stat				nformation		

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

904-998-8572