

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006502

**FILED**  
**Jan 19, 2015**  
**Secretary of State**  
**CC9027894978**

**Entity Name:** THE JACKSONVILLE POP WARNER JUNIOR JAGUARS BOWL, INC.

**Current Principal Place of Business:**

214 NORTH HOGAN  
ROOM 100  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

214 NORTH HOGAN  
ROOM 100  
JACKSONVILLE, FL 32202

**FEI Number: 59-3476024**

**Certificate of Status Desired: No**

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

JAMES, MIKE  
214 NORTH HOGAN  
ROOM 100  
JACKSONVILLE, FL 32202 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name DIXON, OLIVER  
Address 214 NORTH HOGAN, ROOM 100  
City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY  
Name JAMES, MIKE  
Address 1875 SAN MARCO BLVD  
City-State-Zip: JACKSONVILLE FL 32207

Title D  
Name BUTLER, JON  
Address 586 MIDDLETOWN BLVD. C-100  
City-State-Zip: LANGHOM PA 19047

Title DIRECTOR OF FINANCE  
Name JOHNSTON, THOMAS L.  
Address 1033 WHIRLAWAY CIRCLE NORTH  
City-State-Zip: JACKSONVILLE FL 32218

*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: THOMAS L. JOHNSTON**

**DIRECTOR OF FINANCE**

**01/19/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date