2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705767

FILED Jan 07, 2008 Secretary of State

Entity Name: ST. JAMES CITY CIVIC ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3300 FOURTH AVE. 3300 FOURTH AVE. PO BOX 605 ST JAMES CITY, FL 33956 ST JAMES CITY, FL 33956 **New Mailing Address: Current Mailing Address:** 3300 4TH AVE. 2272 YORK ROAD PO BOX 605 ST JAMES CITY, FL 33956 ST JAMES CITY, FL 33956 FEI Number: 59-6148494 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: WARD, DENNIS WARD, DENNIS J MR 2272 YORK ROAD 2272 YORK ROAD ST. JAMES CITY, FL 33956 ST. JAMES CITY, FL 33956 US 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: DENNIS J. WARD 01/07/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition BOB, ELDER PRESIDE Name: Name: 3604 RUBY AVE. Address: Address: City-St-Zip: SAINT JAMES CITY, FL 33956 City-St-Zip: Title: TREA () Delete Title: () Change () Addition DENNIS WARD, Name: Name: Address: 2272 YORK RD. Address: City-St-Zip: ST JAMES CITY, FL City-St-Zip: Title: DIR Title: () Change () Addition () Delete BRABBS, BILL Name: Name: Address: 2420 CHERIMOYA LN Address: City-St-Zip: SAINT JAMES CITY, FL 33956 City-St-Zip: Title: DIR () Delete Title: () Change () Addition Name: HARM, MARYANN Name: 2953 BRACCI DR Address: Address: City-St-Zip: SAINT JAMES CITY, FL 33956 City-St-Zip: Title: DIR () Delete Title: () Change () Addition LOVE, BONNIE Name: Name: 2389CHERIMOYA LANE Address: Address: SAINT JAMES CITY, FL 33956 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition BARBARA, MCGLOIN JOHN, NYHUS MR Name: Name: Address: 2968 BRACCI DRIVE Address: 2260 BANNA ST SAINT JAMES CITY, FL 33956 SAINT JAMES CITY, FL 33956 City-St-Zip: 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: DENNIS J. WARD TREA 01/07/2008