


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # 710021 1. Entity Name BIG TALBOT IMPROVEMENT ASSOCIATION OF DUVAL COUNTY, INC.		
Principal Place of Business 1805 JORK RD JACKSONVILLE FL 32207		Mailing Address 1805 JORK RD JACKSONVILLE FL 32207
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip
Country		Country



1st MOORE CR2E037 (10/06)

4. FEI Number 59-3028411		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DENNETTE, RHYDON C JR. 1805 JORK ROAD JACKSONVILLE FL 32207	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	VD DENNETTE, RHYDON C. 1805 JORK RD. JACKSONVILLE FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NONE		NONE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	000000602850 01/26/07-80107-006 61.25
TITLE	DT CASTLEMAN, MARY H 14718 SUN HARBOR DRIVE HOUSTON TX 77026	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NONE		NONE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D DENNETTE, DARLENE M 11305 SAWMILL ROAD JACKSONVILLE FL 32205	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NONE		NONE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D WILLIAMS, NANCY S. 5648 GRAYWOOD ROAD JACKSONVILLE FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NONE		NONE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D SMOTHERMAN, ROGER W 1407 PALMER TERRACE JACKSONVILLE FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NONE		NONE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NONE		NONE	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information 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.

SIGNATURE: *Rhydon C. Dennette Jr* 1-19-07 (904) 399-4152