

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710021

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: BIG TALBOT IMPROVEMENT ASSOCIATION OF DUVAL COUNTY, INC.

**Current Principal Place of Business:**

1805 JORK RD  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

5965 HECKSCHER DRIVE  
JACKSONVILLE, FL 32226

**Current Mailing Address:**

1805 JORK RD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

5965 HECKSCHER DRIVE  
JACKSONVILLE, FL 32226

FEI Number: 59-3028411

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DENNETTE, RHYDON C JR.  
1805 JORK ROAD  
JACKSONVILLE, FL 32207 US

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

MOORE, PAMELA N  
5965 HECKSCHER DRIVE  
JACKSONVILLE, FL 32226 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: PAMELA N. MOORE

01/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: DENNETTE, RHYDON C.,  
Address: 1805 JORK RD.  
City-St-Zip: JACKSONVILLE, FL

Title: DT ( ) Delete  
Name: CASTLEMAN, MARY H  
Address: 14718 SUN HARBOR DRIVE  
City-St-Zip: HOUSTON, TE 77026

Title: D ( ) Delete  
Name: DENNETTE, DARLENE M  
Address: 11305 SAWMILL ROAD  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete  
Name: SMOTHERMAN, ROGER W  
Address: 1407 PALMER TERRACE  
City-St-Zip: JACKSONVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: MOORE, PAMELA N  
Address: 5965 HECKSCHER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PAMELA N. MOORE

VD

01/20/2009

Electronic Signature of Signing Officer or Director

Date