

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714066

FILED
Jan 31, 2011
Secretary of State

Entity Name: CEDAR HILLS ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business:

4337 WATOMA ST.
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 14013
JACKSONVILLE, FL 322381013

New Mailing Address:

FEI Number: 59-6216158 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NEWSOM, PAMELA P
7249 NORKA DRIVE
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: CHANEY, CHRIS
Address: 6515 SEABOARD AVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP
Name: IMRICH, EUGENE VP
Address: 6566 CHESTERPARK DR
City-St-Zip: JACKSONVILLE, FL 32222

Title: S
Name: KELLUM, RUSTY
Address: 7898 CAPE SIDE WAY
City-St-Zip: JACKSONVILLE, FL 32222

Title: T
Name: NEWSOM, PAMELA
Address: 7249 NORKA DR
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: HERREN, TODD
Address: 6150 CONNIE JEAN RD
City-St-Zip: JACKSONVILLE, FL 32222

Title: D
Name: CHANEY, SHELLEY
Address: 6515 SEABOARD AVE
City-St-Zip: JACKSONVILLE, FL 32244

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: PAMELA P. NEWSOM

TREA

01/31/2011

Electronic Signature of Signing Officer or Director

Date