## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(5)

NORTH FLORIDA BINGO ASSOCIATION, INC.				
Principal Plac	e of Business	Mailing Address		
5824 LONE PINE ROAD JACKSONVILLE FL 32216  5824 LONE PINE ROAD JACKSONVILLE FL 32216				3. Date Incorporated or Qualified  06/10/1968  4. FEI Number  Applied For
]				23-7256691 Not Applicable
21	lace of Business	2a. Mailing Address 26		5. Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	e	City & State		7. Is this nonprofit corporation a homeowners association?
Zip	Country	28 Zip	Country	Yes No  8. This corporation owes or has paid the current year Intangible
24	25	— · ·	30	Personal Property Tax due June 30.  Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent
81 Name				
MC LANAHAN, T.E. 5824 LONE PINE ROAD			82 Street Add	iress (P.O. Box Number is Not Acceptable)
JACKSONVILLE FL 32216			83	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and acceptable obligations of, Section 617.0503, Florida Statutes.				
agent. 1 a	I. C. IVI THANK	1 LC . 11	LANDARIN	1/6/10
10			Registered Agent signature requ	
12.	PVD OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	AMRHEIM, JOHN	2 Detter		TOHN MARRA
STREET ADDRESS	4217 DEVOE PL		1.3 STREET ADDRESS S	575 Turkey Oak Dr. S.
	JACKSONVILLE FL	₽.	1.4 CITY-ST-ZIP	ACKSONVILE, FL 32277
CITY-ST-ZIP TITLE	PD	DELETE	2.1 TITLE 3	Change Addition
NAME	ROWLAND, RAY	The veers		DAVID THRIFT
STREET ADDRESS	18 EAST 21ST ST		2.3 STREET ADDRESS	6523 Commerce 34
CITY-ST-ZIP	JACKSONVILLE FL			ACKSONVILL FL 32216
TITLE	DST	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MC LANAHAN, ED		3.2 NAME	
STREET ADDRESS	5824 LONE PINE ROAD		3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32216		3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

904 731-80//

1/6/18 904 731-8011

**FILED** 

Feb 03 1998 8:00am

Secretary of State