

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714746

FILED
Feb 25, 2004
Secretary of State

Entity Name: NORTH FLORIDA BINGO ASSOCIATION, INC.

Current Principal Place of Business:

5824 LONE PINE ROAD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

5824 LONE PINE ROAD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 23-7256691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC LANAHAN, T.E.
5824 LONE PINE ROAD
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

MCLANAHAN, THOMAS E
5824 LONE PINE ROAD
JACKSONVILLE, FL 32216 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: T.E. MCLANAHAN

02/25/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: ROTHSTEIN, GARY
Address: 4072 SUNBEAM RD
City-St-Zip: JACKSONVILLE, FL 32057

Title: DST () Delete
Name: MC LANAHAN, ED,
Address: 5824 LONE PINE ROAD
City-St-Zip: JACKSONVILLE, FL 32216

Title: VD () Delete
Name: BARLINTI, BOB
Address: 6743 WATONA
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: MCLANAHAN, THOMAS E
Address: 5824 LONE PINE ROAD
City-St-Zip: JACKSONVILLE, FL 32216

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: T.E. MCLANAHAN

DST

02/25/2004

Electronic Signature of Signing Officer or Director

Date