

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716170

FILED  
Jan 22, 2008  
Secretary of State

Entity Name: JACKSONVILLE MARITIME ASSOCIATION, INC.

## Current Principal Place of Business:

12086 FT. CAROLINE RD  
SUITE 104  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 350270  
JACKSONVILLE, FL 32235

## New Mailing Address:

FEI Number: 59-1232405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAY, JAMES R JR  
12086 FT. CAROLINE RD  
SUITE 104  
JACKSONVILLE, FL 32225 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 ( ) Delete  
Name: BYRD, RON  
Address: P.O. BOX 3097  
City-St-Zip: JACKSONVILLE, FL 32206

Title: ST ( ) Delete  
Name: WARREN, LARRY  
Address: 9620 DAVE RAWLS BLVD  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VP ( ) Delete  
Name: LEAR, GARY  
Address: 5160 WILLIAM MILLS ST  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP ( ) Delete  
Name: BROWN, LEE  
Address: 9901 BLOUNT ISLAND BLVD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP ( ) Delete  
Name: CROWELL, DON  
Address: 5800 WILLIAM MILLS RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP ( ) Delete  
Name: BOUCHELLE, HOWARD  
Address: 9901 BLOUNT ISLAND BLVD  
City-St-Zip: JACKSONVILLE, FL 32226

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: RON BYRD

P

01/22/2008

Electronic Signature of Signing Officer or Director

Date