2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# 721345

Entity Name: JACKSONVILLE RETRIEVER CLUB, INC.

Current Principal Place of Business:

C/O JOSEPH A. WATTLEWORTH
19751 NE 87TH LANE
WILLISTON, FL 32696

New Principal Place of Business:

Current Mailing Address:

C/O JOSEPH A. WATTLEWORTH
19751 NE 87TH LANE
WILLISTON, FL 32696

New Mailing Address:

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

Name and Address of Current Registered Agent:

WATTLEWORTH, JOSEPH A
19751 N.E. 87TH LANE
WILLISTON, FL 32696 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:	PARKINSON, CHRIS	
Address:	3054 MOORE DRIVE	
City-St-Zip:	OVIEDO, FL 32765	
Title:	T	( ) Delete
Name:	WATTLEWORTH, JOSEPH A	
Address:	19751 N.E. 87TH LANE	
City-St-Zip:	WILLISTON, FL 32696	
Title:	VP	( ) Delete
Name:	ROEGIERS, STEVE	
Address:	250 S.E. PELICAN ROAD	
City-St-Zip:	STUART, FL 34996	
Title:	S	( ) Delete
Name:	HODGE, MIKE	
Address:	1013 SE 14TH TERR	
City-St-Zip:	OCALA, FL 34471	
Title:	D	( ) Delete
Name:	HORNSBY, KATHY	
Address:	9725 SW 129TH ST	
City-St-Zip:	ARCHER, FL 32618	
Title:	D	( ) Delete
Name:	HORNSBY, ART	
Address:	9725 SW 129TH ST	
City-St-Zip:	ARCHER, FL 32618	

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:	S	(X) Change ( ) Addition
Name:	LEE, GREG	
Address:	574 VARNUM RD	
City-St-Zip:	LAUREL HILL, FL 32567	
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 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: JOSEPH A. WATTLEWORTH T 04/27/2006
Electronic Signature of Signing Officer or Director — Date