2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#724074

FILED Jan 15, 2009 Secretary of State

Entity Name: WEST JAX FLEET RESERVE HALL, INC.

Current Principal Place of Business: New Principal Place of Business: 7673 BLANDING BLVD. JACKSONVILLE, FL 322445111 **Current Mailing Address: New Mailing Address:** 7673 BLANDING BLVD. JACKSONVILLE, FL 322445111 FEI Number: 23-7212855 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALSH, DONALD F 644 BRÁMSCOMB RD GREEN COVE SPRINGS, FL 32043 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ROBY, AL Name: Name: 443 CLEARMONT DR Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: Title: Title: () Delete (X) Change () Addition KULIER, BILL Name: KULIER, BILL Name: Address: 3725 CAMBRY PLACE Address: 3725 CAMBRY PLACE City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32210 Title: () Delete Title: (X) Change () Addition ATTEBERY, CLINTON F., ATTEBERY, CLINTON F., Name: Name: 1408 BELVEDERE AVE. 1408 BELVEDERE AVE. Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL () Delete Title: Title: D (X) Change () Addition ELROD, H C Name: Name: ELROD, H C 1007 WINSTONIAN WAY Address: Address: 7150 SAPPHIRE LN City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: KEYSTONE HEIGHTS, FL 322656 Title: () Delete Title: () Change () Addition JOHNSON, HURHERT Name: Name: 7701 BLANDING BLVD. Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: Title: (X) Change () Addition () Delete THOMAS, J J THOMAS, J J Name: Name: Address: 2929 BOBCAT COURT Address: 2929 BOBCAT COURT GREEN COVE SPRINGS, FL 32043 GREEN COVE SPRINGS, FL 32043 City-St-Zip: 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: AL ROBY P 01/15/2009