## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 28, 2006 8:00 am Secretary of State **DOCUMENT # 732979** 1. Entity Name 04-28-2006 90153 038 \*\*\*\*61.25 THE NORTH FLORIDA BLUE GRASS ASSOCIATION INC. Principal Place of Business Mailing Address 1540 STONEBRIAR RD PO BOX 2830 **GREEN COVE SPRINGS FL 32043** ORANGE PARK FL 32067 2. Principal Place of Business 7935 Cezanne Dr. N. 3. Mailing Address Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Jacksonville City & State Applied For 51-0173740 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent VANDERBILT, TOBY 1540 STONE BRIAR RD **GREEN COVE SPRINGS FL 32043** Jacksonville 8. 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. I am familiar with, and accept the obligations of registered agent FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete TITLE ☐ Change ☐ Addition TITLE ROSE, ROSEMÁRY J NAME NAME 48 RIVER ROAD STREET ADDRESS STREET ADDRESS ORANGÉ PARK FL-32073 CITY-ST-ZIP CITY-ST-ZIP Vice Pres. - Director (VD) ☐ Delete TITLE TITLE VANDERBILT, TOBY NAME NAME 1540 STONEBRIAR RD. STREET ADDRESS STREET ADDRESS GREEN COVE SPRINGS FL 32043 CITY-ST-ZIP CITY-ST-ZIP SECULTA TITLE Delete ☐ Change ☐ Addition EVANS, EARNEST NAME 5341 JULINGTON RIDGE DRIVE STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32257 CITY-ST-7IP CITY-ST-7IP SECY-TREAS (STD) Chan Jane B. Royal 1935 Cezanne Dr. N. Jacksonville, FL 32221 PRESIDENT (PD) Chan Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PRESIDENT ☐ Change TITLE ☐ Delete TITLE Ray, RICK 331, FISH Hall Rd. Brunswick, GA 31523 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST- ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Tane 3. Royan 9.44-781-0373

Coral

SIGNATURE:

SECY-TREAS 4/19/2006

FILED