

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732979

FILED  
Mar 12, 2010  
Secretary of State

**Entity Name:** THE NORTH FLORIDA BLUE GRASS ASSOCIATION INC.

**Current Principal Place of Business:**

7935 CEZANNE DR. N.  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

6491 PINE AVENUE  
FLEMING ISLAND, FL 32003 US

**Current Mailing Address:**

PO BOX 2830  
ORANGE PARK, FL 32067 US

**New Mailing Address:**

FEI Number: 51-0173740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ROYAL, JANE B  
7935 CEZANNE DR. N.  
JACKSONVILLE, FL 32221 US

**Name and Address of New Registered Agent:**

WOODS, HOLLY L  
6491 PINE AVENUE  
FLEMING ISLAND, FL 32003 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: HOLLY L. WOODS

03/12/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DEAN, DONALD  
Address: 3209 223RD STREET  
City-St-Zip: LAWTEY, FL 32058 US

Title: VP  
Name: STRICKLAND, BANNER  
Address: 1401 BECERRA STREET  
City-St-Zip: THE VILLAGES, FL 32162 US

Title: STD  
Name: WOODS, HOLLY L  
Address: 6491 PINE AVENUE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: D  
Name: GILLIAM, DARLENE  
Address: 5304 N.E. 211 DRIVE  
City-St-Zip: EARLETON, FL 32631 US

Title: D  
Name: RYAN, BOB  
Address: 140 SWANN LAKE DRIVE  
City-St-Zip: MELROSE, FL 32666 US

Title: D  
Name: WOODS, RICK  
Address: 6491 PINE AVENUE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

I hereby 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 all other like empowered.

SIGNATURE: HOLLY L. WOODS

STD

03/12/2010

Electronic Signature of Signing Officer or Director

Date