1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 739774

1. Corporation Name

GREATER JACKSONVILLE RACING PIGEON CLUB, INC.

Principal Place of Busines
7338 OLD PLANK RD
JACKSONVILLE FL 32218
110

Mailing Address

8434 BARCELONA AVE ORANGE PARK FL 32073

FILED Mar 16, 1999 8:00 am secretary of State

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2.	Principal Place of Business 2a. Mailing Address					Date Incorporated or Qualifed						
21	•		26					08/01/1977				
_	Suite, Apt. #, etc.		Suite, Apt. #, etc.				4.	FEI Number		L	Applied For	_
22			27	r]				59-2002413			Not Applicable	
23	City & State		City & State				5.	Certificate of Status Desired			75 Additional se Required	
	Zip	Country	Zip	Cour	ntry		6.	Election Campaign Financing		\$5	.00 May Be	
24	,	25	29	30				Trust Fund Contribution	L.J	Ac	ided to Fees	
	9. Name	and Address of Current I			10. Name and Address of New Registered Agent							_
				81	Name R	, ,	5. Petzel					
8434 BARCELONA AVE					82	Street Addres		O. Box Number is Not Accepta	HV			
					83							
	* •				84	City OAC	w	ye Park	FL	85	Zip Code 32073	
11	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Re	oistered Agent signature r	required when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	RS IN 12
TITLE	PD ·	DELETE	1.1 TITLE	PD	Change Change	☐ Addition
NAME	PETŽEL, R J		1.2 NAME	Leon Conover ld		
STREET ADDRESS	8434 BARCELONA AVE		1.3 STREET ADDRESS	1444 Greflet Kd		
CITY-ST-ZIP	ORANGE PARK FL		1.4 CITY-ST-ZIP	Jocksonville, FL 322.		
TITLE	VPD	DELETE	2.1 TITLE	WPD .	Change	Addition
NAME	MEISNER, GARY		2.2 NAME	Mike Muratore 1445 Eastwind Drive Jocksonulle Beach FL		
STREET ADDRESS	4444 1 41/2010 2 00		2.3 STREET ADDRESS	1445 Eastevend Drive	A. A	
CITY-ST-ZIP	JACKSONVILLE FL.32210		2.4 CITY-ST-ZIP	Jacksonulle. Peach, FL		
TITLE	SD	☐ DELETE	3.1 TITLE	50 0 D + 1	Change Change	☐ Addition
NAME	PETZEL, IONE J		3.2 NAME	Jone J. Petzel		
STREET ADDRESS	8434 BARCELONA AVE		3.3 STREET ADDRESS	DT JT DXC-Y		
CITY-ST-ZIP	JACKSONVILLE FL 32216		3.4. CITY-ST-ZIP	Olange Hark, FL 32073		
TITLE	TD	DELETE	4.1 TITLE	TP a Ostal	Change	☐ Addition
NAME	CLOUD, LAURA		4, 2 NAME	Home y. Perge		
STREET ADDRESS	9919 LEAHY AVE		4.3 STREET ADDRESS	Jone J. Petzel 8434 Barcelona AV Brange Park, FL 32073		
CITY-ST-ZIP	JACKSONVILLE FL	4	4.4 CITY-ST-ZIP	Change fack, FL 32013		
TITLE	VD .	DELETE	5.1 TITLE		Change	☐ Addition
NAME .	PETZEL, RONALD		5.2 NAME			
STREET ADDRESS	8424 BARCELONA AVE.		5.3 STREET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL 32073		5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition Addition
NAME			6.2 NAME			
STREET ADDRESS	And the territory		6.3 STREET ADDRESS			•
CITY-ST-ZIP	THE STATE WAY		6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PENTED NAME OF SIGNING OFFICER OR DIRECTOR