## 2005 NOT-FOR-PROFIT CORPORATION \_\_ANNUAL REPORT FILED Mar 04, 2005 08:00 AM **DOCUMENT # 739774 Secretary of State** GREATER JACKSONVILLE RACING PIGEON CLUB, INC. Principal Place of Business Mailing Address 7338 OLD PLANK ROAD 8434 BARCELONA AVE JACKSONVILLE, FL 32220 ORANGE PARK, FL 32073 US 02242005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2002413 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent PETZEL, R J DO NOT WRITE 8434 BARCELONA AVE ORANGE PARK, FL 32073 IN THIS SPACE 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. SIGNATURE. Signature, typed or printed game of registered agent and title if applicance (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME PETZEL, R.J. STREET ADDRESS 8434 BARCELONA AVE CITY-ST-ZIP ORANGE PARK, FL 32073 \_\_\_U00000251630 03/04/05-80058-011 61.25 TITLE NAME PETZEL, IONE J STREET ADDRESS 8434 BARCELONA AVE CITY-ST-ZIP ORANGE PARK, FL 32073 TITLE NAME DANIEL, FRED STREET ADDRESS 3726 GRANDY AVE DO NOT WRITE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

CRY-ST-ZIP TITLE

STREET ADDRESS

CITY-ST-ZIP

NAME

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

JACKSONVILLE, FL 32207

SHRADER, J. GLENN

4135 CREEK BLUFF DR.

SAINT AUGUSTINE, FL 32086

MENING OFFICER OR DIRECTOR

IN THIS SPACE