

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748738

FILED
Jan 27, 2009
Secretary of State

Entity Name: NAVARRE REFLECTIONS, INC.

Current Principal Place of Business:

7785 GULF BLVD
NAVARRE BEACH, FL 32566

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1123
JACKSON, MS 392151123

New Mailing Address:

P.O. BOX 1123
JACKSON, MS 392151123 US

FEI Number: 63-0804544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREW & CREW, PA
25 BEAL PARKWAY NE, STE. 210
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: YOCUM, JIM
Address: 4317 28TH STREET EAST
City-St-Zip: TUSCALOOSA, AL 35404

Title: D () Delete
Name: HEARIN, DICK
Address: 2020 STEELE BLVD
City-St-Zip: BATON ROUGE, LA 70808

Title: DV () Delete
Name: BURCKHALTER, STEVE
Address: 10185 WESTWIND DR
City-St-Zip: SHREVEPORT, LA 71106

Title: D () Delete
Name: YOCUM, ANN
Address: 4317 28TH STREET EAST
City-St-Zip: TUSCALOOSA, AL 35404

Title: DTS () Delete
Name: MILLER, SCOTT
Address: P.O. BOX 1123
City-St-Zip: JACKSON, MS 392151123

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SCOTT F. MILLER

DTS

01/27/2009

Electronic Signature of Signing Officer or Director

Date