


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 761172</b>	
1. Entity Name <b>CISCO GARDENS AREA CIVIC CLUB, INC.</b>	

Principal Place of Business <b>4238 JONES RD JACKSONVILLE, FL 32219</b>	Mailing Address <b>11701 CISCO GARDEN ROAD JACKSONVILLE, FL 32219</b>
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**DO NOT WRITE IN THIS SPACE**



04282008 No Chg-NP CR2E037 (4/08)

4. FEI Number <b>59-2842483</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**SMITH HULSEY & BUSEY  
1800 FIRST UNION NATIONAL BANK TOWER  
225 WATER STREET  
JACKSONVILLE, FL 32202**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE <b>PD</b>	NAME <b>GRINER, BETTY J</b>
STREET ADDRESS <b>11701 CISCO GARDEN ROAD</b>	CITY-ST-ZIP <b>JACKSONVILLE, FL 32219</b>
TITLE <b>VPD</b>	NAME <b>RICHARDSON, FAYE</b>
STREET ADDRESS <b>7017 WEST CISCO GARDEN ROAD</b>	CITY-ST-ZIP <b>JACKSONVILLE, FL 32219</b>
TITLE <b>ST</b>	NAME <b>MARKHAM, WANDA</b>
STREET ADDRESS <b>10101 CISCO DR.</b>	CITY-ST-ZIP <b>JACKSONVILLE, FL 32219</b>
TITLE <b>D</b>	NAME <b>SANBORN, VICTOR S</b>
STREET ADDRESS <b>6708 CISCO GARDEN ROAD</b>	CITY-ST-ZIP <b>JACKSONVILLE, FL 32219</b>
TITLE <b>D</b>	NAME <b>RIGDON, LARRY E</b>
STREET ADDRESS <b>6681 CISCO GARDEN ROAD</b>	CITY-ST-ZIP <b>JACKSONVILLE, FL 32219</b>
TITLE <b></b>	NAME <b></b>
STREET ADDRESS <b></b>	CITY-ST-ZIP <b></b>

**DO NOT WRITE IN THIS SPACE**

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05/22/08-80035-006 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 817, 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: Betty J. Griner Betty J. Griner 4-28-08 (904) 764-2324

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #