

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Sep 01, 2009  
Secretary of State**

DOCUMENT# 763584

**Entity Name:** NORTHSIDE ATHLETIC ASSOCIATION,INC.**Current Principal Place of Business:**1474 ELMAR ROAD  
JACKSONVILLE, FL 32218**New Principal Place of Business:****Current Mailing Address:**731 DUVAL STATION RD, STE 107  
PMB 148  
JACKSONVILLE, FL 32218**New Mailing Address:**

FEI Number: 59-2919514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**VAN SICKLE, DANIEL R III  
54414 ARMSTRONG ROAD  
CALLAHAN, FL 32011 US**Name and Address of New Registered Agent:**STAFFORD, TIMOTHY E  
17376 EAGLE BEND BLVD.  
JACKSONVILLE, FL 32226 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: TIMOTHY E. STAFFORD

09/01/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: VAN SICKLE, DANIEL R III  
Address: 54414 ARMSTRONG ROAD  
City-St-Zip: CALLAHAN, FL 32011Title: S ( ) Delete  
Name: VAN SICKLE, AMANDA C  
Address: 54414 ARMSTRONG ROAD  
City-St-Zip: CALLAHAN, FL 32011Title: TD (X) Delete  
Name: OLSON, JACQUELINE M  
Address: 623 SID DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: STAFFORD, TIMOTHY E  
Address: 17376 EAGLE BEND BLVD.  
City-St-Zip: JACKSONVILLE, FL 32226Title: TD (X) Change ( ) Addition  
Name: OLSON, JACQUELINE M  
Address: 623 SID DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218Title: ( ) 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: JACQUELINE M. OLSON

TD

09/01/2009

Electronic Signature of Signing Officer or Director

Date