


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2005 08:00 AM
Secretary of State

DOCUMENT #764413

1. Entity Name
JACKSONVILLE, FLORIDA, BIG O CHAPTER OF THE SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT OF BA



Principal Place of Business — Mailing Address

10315 WALNUT BEND DRIVE N JACKSONVILLE, FL 32257 US 10315 WALNUT BEND DRIVE N JACKSONVILLE, FL 32257 US

DO NOT WRITE IN THIS SPACE



07072005 No Chg-NP CR2E037 (10/03)

4. FEI Number **59-1981228** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CLAAR, RICHARD W
P O BOX 23727
JACKSONVILLE, FL 32241

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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: *Richard W. Claar*

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	YOST, MELVIN
STREET ADDRESS	12987 BRADY ROAD
CITY ST ZIP	JACKSONVILLE, FL 32223
TITLE	PD
NAME	EIMERS, PATRICK
STREET ADDRESS	12667 FILLLY COURT
CITY ST ZIP	JACKSONVILLE, FL 32223
TITLE	DV
NAME	CORTEZ, ALFANSO
STREET ADDRESS	610 ARLINGWOOD AVE
CITY ST ZIP	JACKSONVILLE, FL 32211
TITLE	D
NAME	STUDSTILL, RICHARD
STREET ADDRESS	3463 SIMCA DRIVE W
CITY ST ZIP	JACKSONVILLE, FL 32277
TITLE	DV
NAME	GAUNT, CALVIN
STREET ADDRESS	8057 CHATEAU DRIVE S
CITY ST ZIP	JACKSONVILLE, FL 32221
TITLE	SD
NAME	CLAAR, RICHARD W
STREET ADDRESS	10315 WALNUT BEND DRIVE N
CITY ST ZIP	JACKSONVILLE, FL 32257

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 08/08/05-80004-025 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Richard W. Claar* 7.31.05 307.1251

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR