

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767583

FILED
Feb 03, 2010
Secretary of State

Entity Name: NORTH FLORIDA ATHLETIC ASSOCIATION, INCORPORATED

Current Principal Place of Business:

8358 EARL CIRCLE WEST
JACKSONVILLE, FL 32219

New Principal Place of Business:

Current Mailing Address:

8358 EARL CIRCLE WEST
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 11-3839351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMILEY, JOHNNY F., ESQ.
333 E. BAY STREET
JACKSONVILLE, FL 32202 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: D
Name: KAISER SANDERS
Address: 5358 EARL CIR. W
City-St-Zip: JAX, FL

Title: D
Name: GLANDELL DAVIS
Address: 1932 BROADWAY AVE.
City-St-Zip: JAX, FL 32209

Title: T
Name: THOMAS, TAWAN A
Address: 7353 GREYFOX LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: S
Name: WILLIAMS, JOAN
Address: 5854 GILCHRIST ST
City-St-Zip: JACKSONVILLE, FL 32219

Title: VD
Name: MOORE, ALVA
Address: 1359 VAN BUREN ST
City-St-Zip: JACKSONVILLE, FL

Title: P
Name: SANDERS, CAROLYN
Address: 8358 EARL CIR W
City-St-Zip: JACKSONVILLE, FL 32219

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN SANDERS

P

02/03/2010

Electronic Signature of Signing Officer or Director

Date