

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90072 020 \*\*\*\*61.25



**DOCUMENT # 768183**

1. Entity Name

**BLUE JAY ASSOC. INC.**

Principal Place of Business  
11011 PELICAN DRIVE  
DADE CITY FL 33525

Mailing Address  
11011 PELICAN DRIVE  
DADE CITY FL 33525



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2075989**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**Treasurer**  
**Sprague, Peggy**  
**38514 Hummingbird CT**  
**Dade City, FL 33525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	THALMAN, BETTY	
STREET ADDRESS	38514 WOODPECKER CT	
CITY-ST-ZIP	DADE CITY FL 33525	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HUNKER, ALICIA	
STREET ADDRESS	11014 BLUEBIRD DR	
CITY-ST-ZIP	DADE CITY FL 33525	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	MCCUTCHEON, DOUGLAS	
STREET ADDRESS	3951 HUMMINGBIRD CT	
CITY-ST-ZIP	DADE CITY FL 33525	
TITLE	T	<input type="checkbox"/> Delete
NAME	SPRAGUE, PEGGY	
STREET ADDRESS	38514 HUMMINGBIRD CT	
CITY-ST-ZIP	DADE CITY FL 33525	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BABB, RICHARD	
STREET ADDRESS	38529 PEACOCK DR	
CITY-ST-ZIP	DADE CITY FL 33525	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MADISON, MARIEL	
STREET ADDRESS	4181 RED BIRD DRIVE	
CITY-ST-ZIP	DADE CITY FL 33525	

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	McCuthcheon, Douglas	
STREET ADDRESS	38515 Hummingbird CT	
CITY-ST-ZIP	Dade City, FL 33525	
TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Madison, Mariel	
STREET ADDRESS	11121 Redbird DRr	
CITY-ST-ZIP	Dade City, FL 33525	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	William Gordon	
STREET ADDRESS	11151 Redbird Drive	
CITY-ST-ZIP	Dade City, FL 33525	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Volcan, Robert	
STREET ADDRESS	38524 Mallard CT	
CITY-ST-ZIP	Dade City FL 33525	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Snow, Dora	
STREET ADDRESS	11100 Bluebird Dr	
CITY-ST-ZIP	Dade City, FL 33525	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: *Peggy Sprague*

1-24-06 352-521-3764