

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004270

FILED
Apr 28, 2008
Secretary of State

Entity Name: NAVARRE KREWE OF JESTERS, INC.

Current Principal Place of Business:

8608 SAND PINE DR.,
NAVARRE BEACH, FL 32566

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5879
NAVARRE BEACH, FL 32566

New Mailing Address:

FEI Number: 59-3622836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, WAYNE
8608 SAND PINE DR.
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

MCARTHUR, PATRICIA
8225 POMPANO STREET
NAVARRE, FL 32566 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: PATRICIA MCARTHUR

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HOLLEY, CEIL
Address: 2948 HIDDEN BAY BLVD.
City-St-Zip: NAVARRE, FL 32566

Title: P () Delete
Name: HALL, WAYNE
Address: 8608 SAND PINE DR.
City-St-Zip: NAVARRE, FL 32566

Title: VPD () Delete
Name: GARDEN, GLENDA
Address: 1990-B HWY 87
City-St-Zip: NAVARRE, FL 32566

Title: SD () Delete
Name: THOMPSON, URSULA
Address: 1964 MORELLA ST.
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MCARTHUR, PATRICIA
Address: 8225 POMPANO STREET
City-St-Zip: NAVARRE, FL 32566

Title: P (X) Change () Addition
Name: HALL, WAYNE
Address: 8608 SAND PINE DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: VPD (X) Change () Addition
Name: CHAPMAN, MARK
Address: 2490 VALLEY ROAD
City-St-Zip: NAVARRE, FL 32566

Title: SD (X) Change () Addition
Name: BISHOP, TAMMY
Address: 8606 SAND PINE DRIVE
City-St-Zip: NAVARRE, FL 32566

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: PATRICIA MCARTHUR

T

04/28/2008

Electronic Signature of Signing Officer or Director

Date