

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005957

FILED
Jan 29, 2009
Secretary of State

Entity Name: NORTH FLORIDA CHRISTIAN BASS CLUB, INC.

Current Principal Place of Business:

896 CHAPMAN DRIVE
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

896 CHAPMAN DRIVE
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 57-1136243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOODY, DAVID P
896 CHAPMAN DRIVE
JACKSONVILLE, FL 32221 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: PD () Delete
Name: WOODY, DAVID P
Address: 896 CHAPMAN DRIVE
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Delete
Name: RICHARD, CARL
Address: 10223 SWARTHMORE DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD () Delete
Name: LEE, BROCK
Address: 1476 CRISTAL SANDS DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD () Delete
Name: STEPHENS, EMORY
Address: 3056 BROADWAY AVE
City-St-Zip: JACKSONVILLE, FL 32254

Title: C () Delete
Name: HARDY, HAROLD K III
Address: 2339 ARDMORE CT
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () 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: DAVID P. WOODY

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date