

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009241

FILED
Apr 30, 2006
Secretary of State

Entity Name: NORTH FLORIDA RAMS, INC

Current Principal Place of Business:

2586 BROWARD RD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

2586 BROWARD RD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 01-0792560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, TOMMIE JR
2586 BROWARD RD
JACKSONVILLE, FL 32218 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: P () Delete
Name: JOHNSON, TOMMIE JR
Address: 2586 BROWARD RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP () Delete
Name: WARREN, KATIE
Address: 3227 DELWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP () Delete
Name: JAMES, WALLACE
Address: 1155 WEST 6TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: GM () Delete
Name: JOHNSON, TOMMIE III
Address: 2586 BROWARD RD
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: BARBARA, JOHNSON
Address: 2586 BROWARD RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP (X) Change () Addition
Name: TOMMIE B., JOHNSON
Address: 2586 BROWARD RD
City-St-Zip: JACKSONVILLE, FL 32218

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TOMMIE JOHNSON JR

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date