

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001135

FILED
Jan 16, 2009
Secretary of State

Entity Name: JACKSONVILLE FENCING CLUB, INC.

Current Principal Place of Business:

3955 RIVERSIDE AVE.
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

3955 RIVERSIDE AVE.
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 14-1875658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINNETT, LORI
1909 UNIVERSITY BLVD S #301
JACKSONVILLE, FL 32216 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: TORO, RAUL E
Address: 2120 FRESCO DR.
City-St-Zip: MIDDLEBURG, FL 320686037 US

Title: VP () Delete
Name: ARD, JAMES P
Address: 2898 SELMA ST.
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: T (X) Delete
Name: KARON, MARITZA
Address: 2876 SANS PAREIL ST.
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: S () Delete
Name: SINNETT, LORI
Address: 1909 UNIVERSITY BLVD S #301
City-St-Zip: JACKSONVILLE, FL 32216 US

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: T/S (X) Change () Addition
Name: SINNETT, LORI
Address: 1909 UNIVERSITY BLVD S #301
City-St-Zip: JACKSONVILLE, FL 32216 US

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: RAUL E TORO JR.

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date