

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002814

FILED
Sep 14, 2006
Secretary of State

Entity Name: JACKSONVILLE UMPIRES ASSOCIATION, INC.

Current Principal Place of Business:

P.O.BOX 551275
JACKSONVILLE, FL 322551275

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 551275
JACKSONVILLE, FL 322551275

New Mailing Address:

FEI Number: 59-3174541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARRINGTON, ROBERT H
12450 RED MILL CT
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

WATSON, JOSEPH G
2519 SERENE COURT
GREEN COVE SPRINGS, FL 32043 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: JOSEPH G WATSON

09/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OLHAUSEN, RANDY R
Address: 10135 GATE PARKWAY NORTH #904
City-St-Zip: JACKSONVILLE, FL 32246

Title: V () Delete
Name: FREY, CHUCK JR
Address: 5205 BRENTVIEW TERR
City-St-Zip: JACKSONVILLE, FL 32210

Title: S () Delete
Name: HARRINGTON, ROBERT H
Address: 12450 RED MILL CT
City-St-Zip: JACKSONVILLE, FL 32224

Title: T () Delete
Name: WATSON, J. GLENN
Address: 2519 SERENE CT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OLHAUSEN, RANDY R
Address: 3591 SOUTH KERNAN BLVD #309
City-St-Zip: JACKSONVILLE, FL 32202

Title: V (X) Change () Addition
Name: HOSMER, RANDALL
Address: 3535 VALENCIA RD
City-St-Zip: JACKSONVILLE, FL 32205

Title: S (X) Change () Addition
Name: FRANCO, WILLIAM
Address: 2094 WILLEDSON DR EAST
City-St-Zip: JACKSONVILLE, FL 32210

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: JOSEPH G WATSON

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09/14/2006

Electronic Signature of Signing Officer or Director

Date