

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006503

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** CRAIG BUSINESS PARK ASSOCIATION, INC.

**Current Principal Place of Business:**

10526 CRAIG INDUSTRIAL DRIVE  
JACKSONVILLE, FL 32235

**New Principal Place of Business:**

10526 CRAIG INDUSTRIAL DRIVE  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

10526 CRAIG INDUSTRIAL DRIVE  
JACKSONVILLE, FL 32235

**New Mailing Address:**

10526 CRAIG INDUSTRIAL DRIVE  
JACKSONVILLE, FL 32225

**FEI Number:** 20-0730553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOORE, JONNY D  
10526 CRAIG INDUSTRIAL DRIVE  
JACKSONVILLE, FL 32235 US

**Name and Address of New Registered Agent:**

MOORE, JONNY D  
10526 CRAIG INDUSTRIAL DRIVE  
JACKSONVILLE, FL 32225 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/25/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOORE, JONNY D  
Address: 10526 CRAIG INDUSTRIAL DR. P.O. BOX 350579  
City-St-Zip: JACKSONVILLE, FL 32225

Title: STD  
Name: MOORE, BARBARA A  
Address: 10526 CRAIG INDUSTRIAL DR. P.O. BOX 350579  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D  
Name: MOORE, JASON SCOTT  
Address: 10526 CRAIG INDUSTRIAL DR. P.O. BOX 350579  
City-St-Zip: JACKSONVILLE, FL 32225

I hereby 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 all other like empowered.

SIGNATURE: JONNY D. MOORE

PD

04/25/2012

Electronic Signature of Signing Officer or Director

Date