## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03043

FILED Apr 17, 2008 Secretary of State

Entity Name: THE UPTOWN CIVITAN CLUB OF JACKSONVILLE, INC.

**Current Principal Place of Business: New Principal Place of Business:** UPTOWN CIVITAN CLUB 1229 SHALLOWFORD DRIVE EAST JACKSONVILLE, FL 32225 **New Mailing Address: Current Mailing Address:** UPTOWN CIVITAN CLUB P O BOX 10266 JACKSONVILLE, FL 322470266 US FEI Number: 59-2355329 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAIGE, ELLEN M 1299 SHALLOWFORD DRIVE EAST JACKSONVILLE, FL 32225 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PAIGE, ELLEN M Name: Name: 1229 SHALLOWFORD DRIVE EAST Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: VD ( ) Delete Title: (X) Change ( ) Addition POORE, GLORIA Name: FRASER, MATTIE J Name: Address: 5353 ARLINGTON EXPWY., #5A Address: 13110 EBBTIDE COURT City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32225 Title: V/D () Delete Title: (X) Change ( ) Addition ANDERSON, MARION ANDERSON, MARION Name: Name: 3599 UNIVERSITY BLVD. S., SUITE B 3599 UNIVERSITY BLVD. S., SUITE B Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216 Title: () Delete Title: () Change () Addition Name: ELLIS, PATRICIA Name: 8378 ALLWOOD COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: V/D (X) Change ( ) Addition NASRALLAH, KAREN CROOKS, LAURA Name: Name: 2233 SEMINOLE ROAD, #36 1596 LANCASTER TERRACE, #5B Address: Address: City-St-Zip: ATLANTIC BEACH, FL 32233 City-St-Zip: JACKSONVILLE, FL 32204 Title: ( ) Delete Title: (X) Change ( ) Addition TROMBERG, MARTHA PATTERSON, BONNIE Name: Name: Address: 2115 LA VACA ROAD Address: 3236 RIVERSIDE AVENUE JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32217 City-St-Zip: 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: ELLEN M PAIGE T 04/17/2008