

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000002508

FILED  
Jan 19, 2006  
Secretary of State

**Entity Name:** JACKSONVILLE NETS BASKETBALL ORGANIZATION INC.

**Current Principal Place of Business:**

5302 CAMELOT FOREST DR  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

**Current Mailing Address:**

5302 CAMELOT FOREST DR  
JACKSONVILLE, FL 32258

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **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:**

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

SHEPHERD, KARIM  
5302 CAMELOT FOREST DR  
JACKSONVILLE, FL 32258 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: KARIM SHEPHERD

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SHEPHERD, KARIM  
Address: 5302 CAMELOT FOREST DR  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VD ( ) Delete  
Name: BROWN, DAREYL  
Address: 7450 BURDI RD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete  
Name: STARKS, DAR'RELL  
Address: 1335 SPANISH NEEDLE CT  
City-St-Zip: ORANGE PARK, FL 32073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: ED (X) Change ( ) Addition  
Name: SALTER, APRIL M  
Address: 2623 MOORESFIELD LANE  
City-St-Zip: JACKSONVILLE, FL 32225

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: KARIM SHEPHERD

PRES

01/19/2006

Electronic Signature of Signing Officer or Director

Date