

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008061

FILED
Apr 26, 2006
Secretary of State

Entity Name: HALFACRE MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

4309 PABLO OAKS COURT SUITE 5
JACKSONVILLE, FL 32224

New Principal Place of Business:

10407 CENTURION PARKWAY SUITE 112
JACKSONVILLE, FL 32256

Current Mailing Address:

11250 OLD ST. AUGUSTINE RD.
#15 -153
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 20-1508182 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENDERSON KEASLER LAW FIRM PA
4309 PABLO OAKS COURT SUITE 5
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

KEASLER LAW FIRM PA
10407 CENTURION PARKWAY SUITE 112
JACKSONVILLE, FL 32224 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: FRANK KEASLER

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HALFACRE, ALBERT E
Address: 11034 PEPPER MILL LANE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: ALEXANDER, WILLIE JR
Address: 12698 SAMPSON ROAD
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: KEASLER, FRANK R JR
Address: 4309 PABLO OAKS COURT SUITE 5
City-St-Zip: JACKSONVILLE, FL 32224

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ATWATER, GREGORY
Address: 1279 KINSLEY AVENUE SUITE 102
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Change () Addition
Name: KEASLER, FRANK R JR
Address: 10407 CENTURION PARKWAY SUITE 112
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Change (X) Addition
Name: RADATZ, DICK JR
Address: 2900 4TH ST. SW
City-St-Zip: ROCHESTER, MN

Title: D () Change (X) Addition
Name: WILLARD, PAYNE JR
Address: 4280 BLEINHEIM PLACE
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: ALBERT HALFACRE

PRES

04/26/2006

Electronic Signature of Signing Officer or Director

Date