2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007174

FILED Mar 24, 2009 Secretary of State

Entity Name: JACKSONVILLE ANTIQUE RADIO SOCIETY INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
10960 BEA LOT #31	ACH BLVD.				
	VILLE, FL 322	246			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	ACH BLVD.				
LOT #31 JACKSON	VILLE, FL 322	246			
FEI Number:	20-3690658	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
7053 CATA	GERALD R ALONIA AVEN VILLE, FL 322				
	named entity e of Florida.	submits this statement for th	e purpose of changing its register	red office or registered agent, or both,	
SIGNATUR					
	Electror	nic Signature of Registered <i>i</i>	Agent	Date	
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANG	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () LUKACH, GER, 7053 CATALON JACKSONVILL	NIA AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OLIN, SEAN R) Delete ON CREEK ROAD	Title: Name: Address:	() Change () Addition	
		L, I L 32230	City-St-Zip:		
Title: Name: Address:) Delete IAM L JR. OD ROAD	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	TD (TIPTON, WILLI 1332 PINEWO JACKSONVILL) Delete IAM L JR. OD ROAD E, FL 32250) Delete F EET	Title: Name: Address:	() Change () Addition () Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	TD (TIPTON, WILLI 1332 PINEWO JACKSONVILL P (ROBAR, NEIL I 811 2ND STRE NEPTUNE BEA D (GROSSMAN, C 627 PALMERA) Delete IAM L JR. OD ROAD E, FL 32250) Delete F EET ACH, FL 32266) Delete CHARLES M	Title: Name: Address: City-St-Zip: Title: Name: Address:	., .	

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: GERALD R. LUKACH D 03/24/2009