2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N06000002178

Entity Name: OAKLEAF ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business:

2754 SPOONBILL TRAIL
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 440155
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 20-4383967 **FEI Number Applied For ( )** **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:

STEWART, JAMAR M
2754 SPOONBILL TRL
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

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:

Title: P/D ( ) Delete
Name: STEWART, JAMAR M
Address: P.O. BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

Title: VP ( ) Delete
Name: STEWART, DEBRA L
Address: P.O BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

Title: T ( ) Delete
Name: STEWART, CHEYENNE D
Address: P.O. BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

Title: C ( ) Delete
Name: STEWART, JAMARQUISE A
Address: P.O. BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: FARRELL, WILLIAM
Address: P.O BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

Title: T (X) Change ( ) Addition
Name: STEWART, DEBRA L
Address: P.O. BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

Title: C (X) Change ( ) Addition
Name: STEWART, CHEYENNE D
Address: P.O. BOX 440155
City-St-Zip: JACKSONVILLE, FL 32222

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: JAMAR M. STEWART P/D 05/01/2008

Electronic Signature of Signing Officer or Director — Date