

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002435

FILED
May 01, 2008
Secretary of State

Entity Name: MATANZAS JEEP 4X4 CLUB, INC.

Current Principal Place of Business:

128 COWRY ROAD
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

PO BOX 860061
ST. AUGUSTINE, FL 320860061

New Mailing Address:

FEI Number: 02-0772953 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:

Name and Address of New Registered Agent:

BLALOCK, CLARENCE A II
128 COWRY ROAD
ST. AUGUSTINE, FL 32086 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLALOCK, CLARENCE A II
Address: 128 COWRY ROAD
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: D () Delete
Name: FALBY, TRACEY
Address: 2100 THORN HOLLOW CT
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D () Delete
Name: KIRBY, KEN
Address: 2109 OLDE TYME AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D () Delete
Name: EDWARDS, JANE
Address: 5811 ATLANTIC BLVD #61
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: CLARENCE A. BLALOCK

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date