2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2008
Secretary of State

DOCUMENT# N06000012063

Entity Name: SIDEWALK FUNDAY SCHOOL, INC

Current Principal Place of Business:

7750 CRANBROOKE ROAD
JACKSONVILLE, FL 32219

New Principal Place of Business:

Current Mailing Address:

7750 CRANBROOKE ROAD
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 20-8879179 **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:

TRAYLOR, BETTY
7750 CRANBROOKE ROAD
JACKSONVILLE, FL 32219 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: D ( ) Delete
Name: GARRETT, DAVID
Address: 2700 UNIVERSITY BLVD SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

Title: P ( ) Delete
Name: TRAYLOR, BETTY
Address: 7750 CRANBROOKE ROAD
City-St-Zip: JACKSONVILLE, FL 32219

Title: DVP ( ) Delete
Name: SIMMONS, WAYNE
Address: 12040 HIDDEN HILLS DR
City-St-Zip: JACKSONVILLE, FL 32216

Title: S ( ) Delete
Name: SIMMONS, SHELLIE
Address: 12040 HIDDEN HILLS DR
City-St-Zip: JACKSONVILLE, FL 32216

Title: T ( ) Delete
Name: YARBOROUGH, MARSHA
Address: 4388 ALLENWOOD COURT
City-St-Zip: JACKSONVILLE, FL 32258

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:

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: BETTY TRAYLOR MRS 09/04/2008
Electronic Signature of Signing Officer or Director — Date