

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003782

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: JACKSONVILLE RAVENS INC.

**Current Principal Place of Business:**

6830 CANDYROOT CT  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**  
6830 CANDYROOT CT  
JACKSONVILLE, FL 32244

**New Mailing Address:**

FEI Number:  FEI Number Applied For ( )  FEI Number Not Applicable (X)  Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRiffin, SCOTT D  
6830 CANDYROOT CT  
JACKSONVILLE, FL 32244 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  Delete  
Name: GRIFFIN, SCOTT D  
Address: 6830 CANDYROOT CT  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP  Delete  
Name: ANDREWS, KEITH  
Address: 5253 LEXINGTON AVE.  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: SCOTT D. GRIFFIN

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date