

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009754

FILED
Apr 17, 2009
Secretary of State

Entity Name: BUSINESS BUILDERS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

4929 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

150 WARREN CIRCLE
JACKSONVILLE, FL 32259 US

Current Mailing Address:

4929 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207 US

New Mailing Address:

150 WARREN CIRCLE
JACKSONVILLE, FL 32259 US

FEI Number: 26-1214184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, TOD R
150 WARREN CIRCLE
1
JACKSONVILLE, FL 32259 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: ROACH, GERALD
Address: 16011 CR-252
City-St-Zip: WELLBORN, FL 32094 US

Title: D () Delete
Name: OWNBY, DESIREE
Address: 1776 OAK GROVE DR. SOUTH
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: D () Delete
Name: SAGE, DOUGLAS
Address: 137 AZALEA POINT DRIVE, SOUTH
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: D () Delete
Name: STOVAL, JOANNE
Address: 248 BLUEBIRD LANE
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: D () Delete
Name: AMATO, DAVID
Address: 1213 BELHAVEN
City-St-Zip: ST. AUGUSTINE, FL 32695 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: VERGALES, HOWARD
Address: 909 EAGLE POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

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: HOWARD G. VERGALES

O

04/17/2009

Electronic Signature of Signing Officer or Director

Date