2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 27, 2008
Secretary of State

DOCUMENT# N07000010013

Entity Name: NE FL ALL ACADEMIES BALL, INC

Current Principal Place of Business:

12357 CACHET DRIVE
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

12357 CACHET DRIVE
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 20-8445393 **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:

KOPP, CYNTHIA W
12357 CACHET DRIVE
JACKSONVILLE, FL 32223 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: VAUGHN, LINDA
Address: 6201 SPRING FOREST CIRCLE
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP ( ) Delete
Name: THOMPSON, NICOLE
Address: 300 MORNING GLORY LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: SEC ( ) Delete
Name: BARLOW, CINDY
Address: 2159 HARBOR LAKE DR
City-St-Zip: ORANGE PARK, FL 32003

Title: TREA ( ) Delete
Name: KOPP, CYNTHIA W
Address: 12357 CACHET DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

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: CYNTHIA W. KOPP TREA 08/27/2008
Electronic Signature of Signing Officer or Director Date