

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000003620

FILED  
Mar 01, 2010  
Secretary of State

**Entity Name:** JACKSONVILLE COUGARS, INC

**Current Principal Place of Business:**

3888 MARSH BLUFF DRIVE  
JACKSONVILLE, FL 32226 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. 54614  
JACKSONVILLE, FL 32226 US

**New Mailing Address:**

P.O. 54614  
JACKSONVILLE, FL 32246 US

**FEI Number:** 26-2427501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

JOHNSON, SHIRL J  
3888 MARSH BLUFF DRIVE  
JACKSONVILLE, FL 32226 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: SHIRL J JOHNSON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JOHNSON, SHIRL J  
Address: 3888 MARSH BLUFF DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: VP  
Name: PLOWDEN, ROSEANN  
Address: 403 WETROCK LANE  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: D  
Name: HUGHEY, RONALD A  
Address: 226 HOLIDAY CIRCLE  
City-St-Zip: SAVANNAH, GA 31419 US

I hereby 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 all other like empowered.

SIGNATURE: SHIRL J JOHNSON

P

03/01/2010

Electronic Signature of Signing Officer or Director

Date