2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2009
Secretary of State

DOCUMENT# N08000008563

Entity Name: JACKSONVILLE ASSOCIATION OF RETIRED FIREFIGHTERS, INC.

Current Principal Place of Business:

1406 GATOR BOWL BLVD.
JACKSONVILLE, FL 32206 US

New Principal Place of Business:

Current Mailing Address:

13941 HUNTERWOOD ROAD
JACKSONVILLE, FL 32225 US

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:

MEIDE, MOSES JR
817 N. MAIN ST
JACKSONVILLE, FL 32202 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: DOOLITTLE, WAYNE
Address: 13941 HUNTERWOOD RD
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP ( ) Delete
Name: LEARN, RON
Address: 790 PERMENTO AVE
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: VP ( ) Delete
Name: DENSON, DUKE
Address: 4369 CHARLESTON LANE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: S ( ) Delete
Name: TREADWELL, LINDA
Address: 4360RAINTREE DRIVE
City-St-Zip: MACCLENNY, FL 32640 US

Title: T ( ) Delete
Name: WOOD, JOHN
Address: 4312 PEPPERGRASS ST
City-St-Zip: MIDDLEBURG, FL 32068 US

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: WAYNE DOOLITTLE P 01/10/2009
Electronic Signature of Signing Officer or Director — Date