

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002090

FILED  
Feb 03, 2010  
Secretary of State

**Entity Name:** CHUMUCKLA ATHLETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

2355 HWY 182  
JAY, FL 32565

**New Principal Place of Business:**

**Current Mailing Address:**

2355 HWY 182  
JAY, FL 32565

**New Mailing Address:**

**FEI Number:** 26-4369368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SABA, DANIEL P ESQ  
4557 CHUMUCKLA HWY  
PACE, FL 32571 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  
Name: RUTHERFORD, WES  
Address: 6310 RICH WAY  
City-St-Zip: PACE, FL 32571

Title: P  
Name: FOSTER, ROBERT D  
Address: 1800 HOWELL PITT RD.  
City-St-Zip: JAY, FL 32565

Title: D  
Name: ELLISON, BEN  
Address: 4032 DALLAS ELLIOTT RD  
City-St-Zip: JAY, FL 32565

Title: D  
Name: WHITE, JACKIE  
Address: 4108 CHARLES CIRCLE  
City-St-Zip: PACE, FL 32571

Title: D  
Name: SMITH, SANDY  
Address: 2190 HOWELL PITT RD  
City-St-Zip: JAY, FL 32565

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:** ROBERT FOSTER

PRES

02/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date