2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# N15933

Entity Name: JACKSONVILLE VOLLEYBALL CLUB INCORPORATED

Current Principal Place of Business:

4471 AUTUMN RIVER RD. E.
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

1017 8TH AVE. NORTH
JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address:

4471 AUTUMN RIVER RD. E.
JACKSONVILLE, FL 32224 US

New Mailing Address:

1017 8TH AVE. NORTH
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-2685731 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORTGAGE ADVISORS, INC.
1805 COPELAND STREET
SUITE 200
JACKSONVILLE, FL 32204 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: VPD ( ) Delete
Name: WHITE, ANNIE
Address: 4426 MILLSTONE CT
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD ( ) Delete
Name: JOHANSEN, BOBBI
Address: 1846 SELVA GRANDE DR
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: PD (X) Delete
Name: ARMSTRONG, ANGIE
Address: 4471 AUTUMN RIVER RD E.
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORRISSEY, CHRIS
Address: 1017 8TH AVE. NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VPD (X) Change ( ) Addition
Name: ARMSTRONG, ANGIE
Address: 4471 AUTUMN RIVER RD E.
City-St-Zip: JACKSONVILLE, FL 32224

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER MORRISSEY PD 02/08/2007

Electronic Signature of Signing Officer or Director — Date