2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17647

FILED Apr 03, 2006 Secretary of State

Entity Name: NORTH FLORIDA FOOTBALL OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:
5391 COL	ESERVE ASSOC #91 .LINS RD vVILLE, FL 32244 US	
JACKSON	VILLE, FL 32244 05	
Current Mailing Address:		New Mailing Address:
	RROW BRANCH CIR. NVILLE, FL 32259 US	2933 WEST 4TH ST JACKSONVILLE, FL 32254 US
FEI Number	r: 59-2693139 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
	Y S. RROW BRANCH CIR. NVILLE, FL 32259 US	
	e named entity submits this statement for the te of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATU	IRE:	
	Electronic Signature of Registered Ag	gent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:	D () Delete WATKINS, JEFF 6819 SNOW WHITE DR JACKSONVILLE, FL 32210 D () Delete MCPHILOMY, ANNALEE 8669 GARDEN ST JACKSONVILLE, FL 32219 T () Delete	Title: D (X) Change () Addition Name: BAKER, KEN Address: 5202 LAVENTURA DR E # 2308 City-St-Zip: JACKSONVILLE, FL 32210 Title: D (X) Change () Addition Name: MCPHILOMY, ANNALEE Address: 8812 JOHNSON TERRACE City-St-Zip: JACKSONVILLE, FL 32219 Title: S (X) Change () Addition
Name: Address: City-St-Zip:	REID, ROY S. 257 SPARROW BRANCH CIR JACKSONVILLE, FL 32259	Name: BERRY, ALLAN Address: 435 SAN CLEMENTI DRIVE City-St-Zip: ORANGE PARK, FL 32003
Title: Name: Address: City-St-Zip:	P () Delete REBERIO, RAY 1002 BLANDING BLVD # 403 JACKSONVILLE, FL 32210	Title: () Change () Addition Name: Address: City-St-Zip:
	S () Delete	Title: T (X) Change () Addition
Title: Name: Address: City-St-Zip:	BOOKER, DOUG 2933 WEST 4TH STREET JACKSONVILLE, FL 32254	Name: BOOKER, DOUG Address: 2933 WEST 4TH STREET City-St-Zip: JACKSONVILLE, FL 32254

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: ROY REID RA 04/03/2006