

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20651

FILED
May 01, 2006
Secretary of State

Entity Name: JACKSONVILLE SUNS BOOSTER CLUB, INC.

Current Principal Place of Business:

1715 HODGES BLVD
3323
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

1715 HODGES BLVD
3323
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 26-7529355 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

WILLIAMS, FRAN
1715 HODGES BLVD
3323
JACKSONVILLE, FL 32224 US

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: HUGHES, JIM
Address: 1070 PERKINS PLACE
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Delete
Name: BOMHOLD, RHONDA
Address: 1475 UNDINE AVE
City-St-Zip: JACKSONVILLE, FL 32221

Title: S () Delete
Name: WILLIAMS, FRAN
Address: 1715 HODGES BLVD
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: T () Delete
Name: SCHUMPP, ALANE
Address: 1808 GRASSINGTON WAY LANE
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAWYER, TOM
Address: 1055 PALM LANDING DRIVE S.
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VP (X) Change () Addition
Name: TAYLOR, DEBI
Address: 1300 SHETTER AVENUE #55
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: S (X) Change () Addition
Name: WILLIAMS, FRAN
Address: 1715 HODGES BLVD #3323
City-St-Zip: JACKSONVILLE, FL 32224 US

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: ALANE SCHUMPP

T

05/01/2006

Electronic Signature of Signing Officer or Director

Date