2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20651

FILED Feb 17, 2009 Secretary of State

Entity Name: JACKSONVILLE SUNS BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

9539 DARBY TOWN LANE

JACKSONVILLE, FL 32222 US

301 A. PHILIP RANDOLPH BLVD.

JACKSONVILLE, FL 32202 US

Current Mailing Address: New Mailing Address:

9539 DARBY TOWN LANE
JACKSONVILLE, FL 32222 US 9539 DARBYTOWN LANE
JACKSONVILLE, FL 32222 US

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

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

TYRE, BONNIE 9539 DARBYTOWN LANE JACKSONVILLE, FL 32222 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:

Flacture is Circulated at Devictor of Assert

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: SAWYER, TOM Name: STIKA, KEVIN L

Address: 1055 PALM LANDING DRIVE S. Address: 9796 NELSON FORKS DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233 City-St-Zip: JACKSONVILLE, FL 32222 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 PHARO, NANCY
 Name:
 QUICK, DENSIL

 Address:
 4430 PEPPERMILL PL.
 Address:
 1914 LONG BAY ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 MIDDLEBURG, FL 32068 US

Title: S () Delete Title: S (X) Change () Addition Name: SAELER, JACKIE Name: WILLIAMS, FRAN

 Address:
 333 LAURINA ST. APT 144
 Address:
 1715 HODGES BLVD. # 3323

 City-St-Zip:
 JACKSONVILLE, FL 32216 US
 City-St-Zip:
 JACKSONVILLE, FL 32224 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 TYRE, BONNIE
 Name:
 TYRE, BONNIE J

 Address:
 9539 DARBYTOWN LANE
 Address:
 9539 DARBYTOWN LANE

 City-St-Zip:
 JACKSONVILLE, FL 32222
 City-St-Zip:
 JACKSONVILLE, FL 32222

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: BONNIE TYRE T 02/17/2009