2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 01, 2008 8:00 am Secretary of State

DOCUMENT # N23589 1. Entity Name CENTRAL CIVITAN CLUB OF JACKSONVILLE, FLORIDA, INC.							90019 013 **			
Principal Place of Business Mailing Address 2325 BUTTONWOOD DRIVE 2325 BUTTONWOOD DRIVI JACKSONVILLE, FL 32216-2510 JACKSONVILLE, FL 32216					400-	888 H181 BHB 18HB 1	iri) birsi disin birsi bisin		1119) BJ 1881	
Principal Place of Business - No P.O. Box #										
Suite, Apt. #, etc. So		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01232008	Chg-NP	CR2E037 (12	2/06)		
City & State		City & State			4. FEI Number 59-2770	653			oplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of	Status Desired			ditional	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New	Registered Agent			
SPEIR, EDWARD E 1545 BLANDING BLVD JACKSONVILLE, FL: 32210-1301				Name Street Address (P.O. Box Number is Not Acceptable)						
			City	City FL Zip Code						
8. The above	e named entity submits this statement for tions of registered agent.	the purpose of changing its re-	gistered office o	r registere	ed agent, or both,	in the State of F	1	ır with,	and accept	
SIGNATURE										
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	legistered Agent signat	ture required	when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp. Trust Fund Cor	aign Financing		\$5.00 May Be Added to Fees		Make check pay			
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indicated on this report or supplied with this filing does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I arm 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Elizabeth Corey, TD

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904-721-1132 Daytime Phone I