

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24877

FILED
Mar 05, 2009
Secretary of State

Entity Name: NORTH FLORIDA JUNIOR GOLF FOUNDATION, INC.

Current Principal Place of Business:

% SHEFFIELD & BOATRIGHT, P.A.
6101 GAZEBO PARK PLACE NORTH, STE. 101
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

% SHEFFIELD & BOATRIGHT, P.A.
6101 GAZEBO PARK PLACE NORTH, STE. 101
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-2876904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFIELD & BOATRIGHT, P.A.
6101 GAZEBO PARK PL N
STE 101
JACKSONVILLE, FL 32257 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: PD () Delete
Name: ANDERSON, MARLA M
Address: 225 WALTER STREET, FL0545
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: TUCKER, ED
Address: 10034 GOLF CLUB DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: HUGHES, BILL
Address: 110 CHAMPIONSHIP WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD () Delete
Name: CARLSON, LINDA L
Address: 6101 GAZEBO PARK PL., NORTH, STE. 101
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD () Delete
Name: SHEFFIELD, HOWARD
Address: 6101 GAZEBO PARK PL., NORTH, STE. 101
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD () Delete
Name: CARLSON, LINDA L
Address: 116 PLANTERS ROW EAST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: J. HOWARD SHEFFIELD

DIR

03/05/2009

Electronic Signature of Signing Officer or Director

Date