

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24877

FILED  
Apr 29, 2011  
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  
Name: LYNCH, MIKE  
Address: 6101 GAZEBO PARK PL N, 101  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD  
Name: BOROCZ, MIKE  
Address: 6101 GAZEBO PARK PL N, SUITE 101  
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD  
Name: HORNER, STEVE  
Address: 6101 GAZEBO PARK PL N, SUITE 101  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD  
Name: BRENNAN, PAT  
Address: 6101 GAZEBO PARK PL., NORTH, STE. 101  
City-St-Zip: JACKSONVILLE, FL 32257

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

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

I hereby 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 all other like empowered.

SIGNATURE: MIKE LYNCH

PD

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date