2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2011
Secretary of State

DOCUMENT# N25809

Entity Name: WEST JACKSONVILLE CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

10219 HAMLET GLEN DR.
JACKSONVILLE, FL 32221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60451
JACKSONVILLE, FL 32236 US

New Mailing Address:

FEI Number: 56-1948225 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NECHVATAL, ALLYSON
10219 HAMLET GLEN DR.
JAX, FL 32221 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: T
Name: NECHVATAL, ALLYSON
Address: 10219 HAMLET GLEN DR.
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: P
Name: CORNEAL, PAUL
Address: 866 CRESSWELL LN W
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: V
Name: BURTON, RICHARD
Address: 458 PORTOBELLO DR
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: VP
Name: DILL, RIC
Address: 419 MONTVILLE COURT
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: D
Name: PETERSON, HAROLD
Address: 9774 BROCKHAM CT
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: D
Name: NECHVATAL, DAVID
Address: 10219 HAMLET GLEN DR
City-St-Zip: JACKSONVILLE, FL 32221 US

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: ALLYSON NECHVATAL TREA 02/28/2011
Electronic Signature of Signing Officer or Director Date