

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27228

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: NORTHEAST FLORIDA PARALEGAL ASSOCIATION, INC.

## Current Principal Place of Business:

C/O SMITH & HULSEY  
225 WATER ST, STE 1800  
JACKSONVILLE, FL 32202 US

## New Principal Place of Business:

## Current Mailing Address:

221 N HOGAN ST BOX 164  
JACKSONVILLE, FL 32202 US

## New Mailing Address:

FEI Number: 59-2902263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH & HULSEY  
1800 FLORIDA NATIONAL BANK TOWER  
225 WATER STREET  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

SMITH & HULSEY  
WACHOVIA BUILDING, SUITE 1800  
225 WATER STREET  
JACKSONVILLE, FL 32202 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:

04/30/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: ROGERS, LORI  
Address: 601 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: S ( ) Delete  
Name: MORIN, CAROL  
Address: 1200 RIVERPLACE BLVD, SUITE 800  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VP ( ) Delete  
Name: BONTESKI, SUSAN  
Address: 1301 RIVERPLACE BLVD., SUITE 1500  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: P ( ) Delete  
Name: COSTA, MARGARET  
Address: ONE INDEPENDENT DRIVE, SUITE 2600  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP ( ) Delete  
Name: FOLSOM, SARAH  
Address: 50 NORTH LAURA STREET, SUITE 1900  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP ( ) Delete  
Name: RICHARD, MARY  
Address: 5050 EDGEWOOD COURT  
City-St-Zip: JACKSONVILLE, FL 32254

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: COSTA, MARGARET C  
Address: 221 N. HOGAN ST., BOX 164  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S (X) Change ( ) Addition  
Name: SAMS, ROBIN  
Address: 221 N. HOGAN ST., BOX 164  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP (X) Change ( ) Addition  
Name: O'GRADY, NANCY  
Address: 221 N. HOGAN ST., BOX 164  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: P (X) Change ( ) Addition  
Name: BONTESKI, SUSAN M  
Address: 221 N. HOGAN ST., BOX 164  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP (X) Change ( ) Addition  
Name: RICHARD, MARY  
Address: 221 N. HOGAN ST., BOX 164  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP (X) Change ( ) Addition  
Name: HOUSTON, CINDY L  
Address: 221 N. HOGAN ST., BOX 164  
City-St-Zip: JACKSONVILLE, FL 32202

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: MARGARET C. COSTA, TREASURER

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date