

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33446

FILED
Jan 16, 2007
Secretary of State

Entity Name: THE NORTH FLORIDA KOI CLUB, INC.

Current Principal Place of Business:

2732 CONNIE CIRCLE
ORANGE PARK, FL 32065 US

New Principal Place of Business:

3874 HABERSHAM FORST DRIVE
JACKSONVILLE, FL 32223 US

Current Mailing Address:

2732 CONNIE CIRCLE
ORANGE PARK, FL 32065 US

New Mailing Address:

3874 HABERSHAM FOREST DRIVE
JACKSONVILLE, FL 32223 US

FEI Number: 59-2935078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, JAN D
2732 CONNIE CIRCLE
ORANGE PARK, FL 32065 US

Name and Address of New Registered Agent:

GIBSON, JOYCE A
3874 HABERSHAM FOREST DRIVE
JACKSONVILLE, FL 32223 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: JOYCE A GIBSON

01/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHADE, GEORGE S
Address: 4651 BLOUNT DR
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Delete
Name: ALTIERY, SARAH
Address: 3044 RICKY DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: SD () Delete
Name: ALLEN, LILLIAN
Address: 11852 NARROW OAK LN N.
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD () Delete
Name: TODORSKY, WILLIAM
Address: 2131 SAVHOR LN
City-St-Zip: JACKSONVILLE, FL 32216 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GASSON, TIM
Address: 1416 AHARONWOOD LANE
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: TD (X) Change () Addition
Name: GIBSON, JOYCE A
Address: 3874 HABERSHAM FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: SD (X) Change () Addition
Name: HAWLEY, NELLIE
Address: 11604 SURFWOOD AVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: D (X) Change () Addition
Name: ROBERTS, JIM
Address: 548 MILLHOUSE LANE
City-St-Zip: ORANGE PARK, FL 32065 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOYCE A GIBSON

TD

01/16/2007

Electronic Signature of Signing Officer or Director

Date