## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N33446

FILED Mar 04, 2009 Secretary of State

Entity Name: THE NORTH FLORIDA KOI CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

3874 HABERSHAM FORST DRIVE 4651 BLOUNT AVENUE

JACKSONVILLE, FL 32223 US JACKSONVILLE, FL 32210 US

Current Mailing Address: New Mailing Address:

2732 CONNIE CIR 4651 BLOUNT AVENUE

ORANGE PARK, FL 32065 US JACKSONVILLE, FL 32210 US

FEI Number: 36-4610507 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, DAVIS J LEONARD, VICKIE E 2732 CONNIE CIRCLE 4651 BLOUNT AVENUE

ORANGE PARK, FL 32065 US JACKSONVILLE, FL 32210 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: VICKIE E. LEONARD 03/04/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGE

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: P (X) Change ( ) Addition

Name:TODORSKY, WILLIAMName:RAMSEY, STEVEAddress:2131 SAUL DRIVEAddress:3331 OAKLEAF LANECity-St-Zip:JACKSONVILLE, FL 32216 USCity-St-Zip:MIDDLEBURG, FL 32068 US

Title: S () Delete Title: VP (X) Change () Addition

 Name:
 ALTIERY, SARAH
 Name:
 WEHBY, DAN

 Address:
 3044 RICKY DRIVE
 Address:
 2607 RED FOX ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32223 US
 City-St-Zip:
 ORANGE PARK, FL 32073 US

Title: VP ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 RAMSEY, STEVE
 Name:
 TODORSKY, MARY

 Address:
 3331 OAKLEAF LANE
 Address:
 2131 SAUL DR

City-St-Zip: ORANGE PARK, FL 32065 US City-St-Zip: JACKSONVILLE, FL 32216 US

 Name:
 BROWN, DAVIS J
 Name:
 LEONARD, VICKIE E

 Address:
 2732 CONNIE CIRCLE
 Address:
 4651 BLOUNT AVENUE

 City-St-Zip:
 ORANGE PARK, FL 32065 US
 City-St-Zip:
 JACKSONVILLE, FL 32210 US

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: VICKIE E. LEONARD T 03/04/2009