

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37458

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: KNIGHTS OF RIZAL OF GREATER JACKSONVILLE, INC.

**Current Principal Place of Business:**

8358 CHASON RD E  
JACKSONVILLE, FL 32244 US

**New Principal Place of Business:**

RANDY FLETCHER  
1578 WINSTON PLACE  
ORANGE PARK, FL 32003 US

**Current Mailing Address:**

8358 CHASON RD E  
JACKSONVILLE, FL 32244 US

**New Mailing Address:**

RANDY FLETCHER  
1578 WINSTON PLACE  
ORANGE PARK, FL 32003 US

FEI Number: 59-3020764

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALVADOR, ALMARIO D  
8358 CHASON RD E  
JACKSONVILLE, FL 32244 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: CD ( ) Delete  
Name: FLETCHER, RANDAL G  
Address: 1578 WINSTON PLACE  
City-St-Zip: ORANGE PARK, FL 32003 US

Title: D ( ) Delete  
Name: AUDIJE, DOROTEO C  
Address: 851 BRIARCREEK RD  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: D ( ) Delete  
Name: SALVADOR, ALMARIO D  
Address: 8358 CHASON RD E  
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: D ( ) Delete  
Name: GO, ROMUALDO  
Address: 8353 IRELAND DRIVE  
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: D ( ) Delete  
Name: AINZA, ALEX  
Address: 1793 ALDER DRIVE  
City-St-Zip: ORANGE PARK, FL 32073 US

Title: D ( ) Delete  
Name: PEBENITO, ART  
Address: 602 CASTLEBERRY CT  
City-St-Zip: JACKSONVILLE, FL 32259 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: FLETCHER, RANDY G  
Address: 1578 WINSTON PLACE  
City-St-Zip: ORANGE PARK, FL 32003 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALMARIO D. SALVADOR

TREA

01/16/2009

Electronic Signature of Signing Officer or Director

Date