## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Feb 03, 2001 8:00 am Secretary of State **DOCUMENT # N40972** 1. Entity Name BOYS' HOME ASSOCIATION, INC. 02-03-2001 90042 010 \*\*\*\*70.00 Principal Place of Business Mailing Address 2354 UNIVERSITY BLVD., NORTH 2354 UNIVERSITY BLVD., NORTH JACKSONVILLE FL 32211-0296 JACKSONVILLE FL 32211-0296 EUU16341 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0624369 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROWN, ROBERT G., JR. Street Address (P.O. Box Number is Not Acceptable) 2354 UNIVERSITY BLVD., N JACKSONVILLE FL 32211 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: **\$5.00** May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Addition BROWN, ROBERT G. JR NAME NAME 2354 UNIVERSITY BLVD N STREET ADDRESS STREET ADDRESS CITY-ST-7IP JACKSONVILLE FL CITY-ST-ZIP TITLE TITLE Delete ☐ Change Addition PARKER, STEPHEN O. NAME NAME Quinton White 2800 Univ. Blud. N. STREET ADDRESS 6362 E CHRISTOPHER CREEK ROAD STREET ADDRESS CITY-ST-ZIP Jacksonville FL CITY-ST-7IP 3a2 ii JAK. FL TITLE Delete ----TITLE∙⊂ Addition Change FAULKNER, JACK S NAME NAME Nancy Posick STREET ADDRESS 9474 WOODHAVEN ROAD STREET ADDRESS 000-7 Hartley ROAD CITY-ST-ZIP JACKSONVILLE FL CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition JAPOUR, FRANK D NAME NAME 611 D'ORLEANS COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 CITY-ST-ZIP TITLE Delete Change ☐ Addition WHITTIER, CARY NAME NAME STREET ADDRESS **4213 KERLE STEEET** STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32205 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition ROUSE, DAVID K NAME NAME STREET ADDRESS 2711 UNIV. BLVD N. STREET ADDRESS CITY-ST-7IP JACKSONVILLE FL 32211 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

Braun Ir. 1/29/01

904-743-3611