


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # N40972 1. Entity Name BOYS' HOME ASSOCIATION, INC.	
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Principal Place of Business 2354 UNIVERSITY BLVD., NORTH JACKSONVILLE, FL 32211-0296	Mailing Address 2354 UNIVERSITY BLVD., NORTH JACKSONVILLE, FL 32211-0296 US
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DO NOT WRITE IN THIS SPACE



02062008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-0624369	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, ROBERT G JR
2354 UNIVERSITY BLVD., N
JACKSONVILLE, FL 32211

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, ROBERT G JR 2354 UNIVERSITY BLVD N JACKSONVILLE, FL 32211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRICE, RUSSELL 219 N. NEWMAN STREET JACKSONVILLE, FL 32203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KRUG, DONALD 6315 ELISE DRIVE JACKSONVILLE, FL 32211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROUSE, DAVID K 2711 UNIVERSITY BOULEVARD, NORTH JACKSONVILLE, FL 32211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITTIER, CARY 4213 KERLE STEET JACKSONVILLE, FL 32205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACKESY, FRANK 14386 CHERRY LAKE DRIVE EAST JACKSONVILLE, FL 32225

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02/27/08-80016-020 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:  **Robert G. Braun, Jr., Pres/CEO 2/6/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone 904-424-6003