2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with a

SIGNATURE:

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RE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 01, 2005 8:00 am **Secretary of State** DOCUMENT # N41988 1. Entity Name 03-01-2005 90079 042 ****61.25 NORTH FLORIDA DX ASSOCIATION, INC. Principal Place of Business Mailing Address 4274 CHOKEBERRY RD 4274 CHOKEBERRY RD MIDDLEBURG FL 32068 MIDDLEBURG FL 32068 2. Principal Place of Business 3. Mailing Address 11432 LOWNDESBORD DRIVE 11432 LOWNDESBORD URINE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) 1st MOORE City & State City & State 4. FEI Number Applied For JACKSONVILLE NO-T APPLICABLE ACKSONVILLE Not Applicable Zip 322231376 Country \$8.75 Additional 5. Certificate of Status Desired 32223-1376 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HuGHES DAMES TIVEY, RONALD Street Address (P.O. Box Number is Not Acceptable) 11432 LOWNDESBOLD DRIVE 4274 CHOKEBERRY RD MIDDLEBURG FL 32068 Zip Code FACKSONVILLE 32223-1376 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. (NOTE: Registered Agent signature required when reinstating) or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TITLE Delete TITLE ☐ Addition BLAKE, RON GREG WILSON 2781 PAINT HORSE TRAIL 258 WESLEY RD STREET ADORESS STREET ADDRESS GREEN COVE SPRINGS FL 32043-9571 CITY-ST-ZIP HILLIARD, FL 32046 CITY-ST-7IP Delete Addition THE TITLE HUGHES, JIM GERALD D. CONVER NAME NAME 11432 LOWNDESBORO DR 3800 CONNER-COLLINS RD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32223-1376 CITY-ST-ZIP CITY-ST-7iP HILLIARD, FL 32046 Delete MIKE REUBUIN -PRICE, DAVID NAME NAME 12140 ROSETTA RD 6428 NW 42 LANE STREET ADDRESS STREET ADDRESS Jacksonville, FL 32221 CITY-ST-ZIP GAINESVILLE FL 32606 CITY-ST-ZIP ☐ Addition TITLE Delete TIVEY, RONALD JAMES L. HUGHES NAME 11432 LOWNDESBORD DRIVE 4274 CHOKEBERRY RD STREET ADDRESS STREET ADDRESS MIDDLEBURG FL 32068 CITY-ST-ZIP JACKGONVILLE. FL 32223-1376 CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition TITL F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

FILED

Ames L. Hug He 5 15 FEB 2005 904-262-1736