2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED DOCUMENT # N47313 Mar 08, 2000 8:00 am 1. Entity Name **Secretary of State** NORTHEAST FLORIDA DERBY ASSOCIATION, INC. 03-08-2000 90039 049 ****61.25 Principal Place of Business Mailing Address 1725 S. FLETCHER AVE. 1725 S. FLETCHER AVE FERNANDINA BEACH FL 32034-2359 FERNANDINA BCH. FL 32034 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3108164 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name P.D. Box Number is Not Acceptable) Street Address NEAL, DONALD C. 1725 S. FLETCHER AVE. FERNANDINA BEACH FL 32034 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 DATE (NOTE. Registered Agent signature required when reinstating) ed agent and title if applicable Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution. Department of State Added to Fees -FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE HIGGS, DUWAYNE NAME NAME 605 WELLS RD STREET ADDRESS STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE COLEMAN, EUGENE NAME NAME 1006 SO 10TH ST STREET ADDRESS STREET ADDRESS FERNANDINA BCH. FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE. PICKETT, SEVE NAME NAME 3178 CREWS ROAD STREET ADDRESS STREET ADDRESS FERNANDINA BCH. FL CITY-ST-ZIE CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE HASPEL, SHERYL NAME NAME 2126 WESLEY RD STREET ADDRESS STREET ADDRESS YULEE FL CITY-ST-7IP CITY-ST-ZIP Addition Change TITLE PAR S Delete TITLE TOUCH NEAL, DONALD C NAME NAME 1725 S FLETCHER AVE STREET ADDRESS STREET ADDRESS FERNANDINA BCH FL CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change **PURVIS, TOMMY** NAME NAME 2500 ATLANTIC AVE STREET ADDRESS STREET ADDRESS FERNANDINA BCH FL CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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