2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# N48795

Entity Name: NORTH FLORIDA CHAPTER SAFARI CLUB INTERNATIONAL, INC.

Current Principal Place of Business:

11655 CENTRAL PARKWAY
SUITE 302
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 380058
JACKSONVILLE, FL 322050088

New Mailing Address:

P.O. BOX 380058
JACKSONVILLE, FL 322050058

FEI Number: 59-3131540 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DEBERRY, DAVID A TRESURE
11474 V.C. JOHNSON RD
JACKSONVILLE, FL 32218 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: PD ( ) Delete
Name: MCGEHEE, CLIFF
Address: 11655 CENTRAL PARKWAY, SUITE 302
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPD ( ) Delete
Name: CRANFORD, JAMES A
Address: 5055 EAGLE POINT DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: TD ( ) Delete
Name: DEBERRY, DAVID A
Address: 11474 V.C. JOHNSON RD
City-St-Zip: JAX, FL 32218

Title: SD ( ) Delete
Name: MATTHEWS, JOAN S
Address: 3670 WALSH STREET
City-St-Zip: JACKSONVILLE, FL 322059036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DAVID ALAN DEBERRY TREA 04/25/2009

Electronic Signature of Signing Officer or Director — Date