2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# N92000001006

Entity Name: RIVER CITY SOFTBALL ASSOCIATION, INC.

Current Principal Place of Business:

2946 E. KNIGHTS LANE
VICTORIA PARK
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

3263 VICTORIA PARK ROAD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3157334 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JAXON, JAMIE J
3263 VICTORIA PARK ROAD
JACKSONVILLE, FL 32216 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:	JAXON, JAMIE J	
Address:	3263 VICTORIA PK RD	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	AD	( ) Delete
Name:	VINCENT, MIA	
Address:	3263 VICTORIA PARK ROAD	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	TD	( ) Delete
Name:	COURSON, JOANNA	
Address:	3209 BRIDGE COVE CIRCLE EAST	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	SD	( ) Delete
Name:	VOLZ, MELINDA	
Address:	1942 NAVAHO	
City-St-Zip:	JACKSONVILLE, FL 32210	

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 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: JAMIE J JAXON PD 07/03/2006

Electronic Signature of Signing Officer or Director — Date