

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000001948 (9)

1. Corporation Name

BITS 'N PIECES OFF ROAD RECREATIONAL ASSOCIATION  
INC.



Principal Place of Business

Mailing Address

6044 HORSESHOE DR.  
JACKSONVILLE FL 32254

XXXXXX  
XXXXXX  
XXXXXX  
US

3. Date Incorporated or Qualified  
04/30/1993

3a. Date of Last Report  
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 c/o Fred R. Jeffries

4. FEI Number  
59-3184076

Applied For  
Not Applicable

22 City & State

27 6044 Horseshoe Drive

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 Zip

28 Jacksonville, FL

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24 Country

29 32254 30 USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KING, DAVID A  
ATTORNEY AT LAW  
1416 KINGSLEY AVENUE  
ORANGE PARK FL 32073

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME JEFFRIES, FRED R  
STREET ADDRESS 6044 HORSESHOE DR  
CITY - ST - ZIP JACKSONVILLE FL 32254

TITLE D  
NAME JEFFRIES, SHERYL D  
STREET ADDRESS 6044 HORSESHOE DR  
CITY - ST - ZIP JACKSONVILLE FL 32254

TITLE D  
NAME JEFFRIES, GEORGE E  
STREET ADDRESS 3549 N LANE AVE  
CITY - ST - ZIP JACKSONVILLE FL 32254

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fred R. Jeffries, Director

Date

Daytime Phone #

CR2E037 (12/95)