

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003377

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: OLD ARLINGTON INC.

## Current Principal Place of Business:

1261 ALDERMAN RD. EAST  
JACKSONVILLE, FL 32211

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 15304  
JACKSONVILLE, FL 32239

## New Mailing Address:

FEI Number: 59-3193543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FANT, WAVERLY  
1261 ALDERMAN RD. EAST  
JACKSONVILLE, FL 32211 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: D ( ) Delete  
Name: PACE, JOHNSON H JR  
Address: 701 HOGAN ST  
City-St-Zip: JACKSONVILLE, FL 32202

Title: SD ( ) Delete  
Name: EVANS, KATHLEEN  
Address: 7809 GLEN ECHO RD. N.  
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD ( ) Delete  
Name: FANT, WAVERLY  
Address: 1261 ALDERMAN RD. EAST  
City-St-Zip: JACKSONVILLE, FL 32211

Title: PD ( ) Delete  
Name: SANDERS, ROBERT  
Address: 1219 ROMNEY STREET  
City-St-Zip: JACKSONVILLE, FL 32211

## 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: WAVERLY FANT

TR

01/06/2009

Electronic Signature of Signing Officer or Director

Date