2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003377

FILED Feb 26, 2011 Secretary of State

Entity Name: OLD ARLINGTON INC.

Current Principal Place of Business: New Principal Place of Business:

1261 ALDERMAN RD. EAST 7866 GLEN ECHO RD N JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32211

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 15304 JACKSONVILLE, FL 32239

FEI Number: 59-3193543 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FANT, WAVERLY

1261 ALDERMAN RD. EAST

JACKSONVILLE, FL 32211 US

BURT, LESLIE A

7866 GLEN ECHO RD N

JACKSONVILLE, FL 32211 US

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: LESLIE ANN BURT 02/26/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 LAVERNIA, LAURA M

 Address:
 5340 CLIFTON RD

 City-St-Zip:
 JACKSONVILLE, FL 32211

Title: S

Name: DASARO, MARSHA J Address: 2018 SUNRISE DR

City-St-Zip: JACKSONVILLE, FL 32246 US

Title: TD

 Name:
 BURT, LESLIE A

 Address:
 7866 GLEN ECHO RD N

 City-St-Zip:
 JACKSONVILLE, FL 32211 US

Title:

Name: PACE, JOHNSON H Address: 701 N OCEAN ST

City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VD

 Name:
 POWELL, CLEVE

 Address:
 10833 FT CAROLINE RD

 City-St-Zip:
 JACKSONVILLE, FL 32225 US

I hereby 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 all other like empowered.

SIGNATURE: LESLIE ANN BURT TREA 02/26/2011