2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004474

Entity Name: PRO-AM JAX, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
% KARL TATHAM 11820 JOHN WILLIAM TERRACE JACKSONVILLE, FL 32218	

Current Mailing Address:	**New Mailing Address:**
% KARL TATHAM 11820 JOHN WILLIAM TERRACE JACKSONVILLE, FL 32218	

FEI Number: 59-3252316   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:**
BRANT, MOORE, SAPP, MACDONALD & WELLS PA 50 NORTH LAURA STREET SUITE 2750 JACKSONVILLE, FL 32202 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: _____

Electronic Signature of Registered Agent   Date

OFFICERS AND DIRECTORS:

Title: D
Name: HINES, TA TANIESHI
Address: P.O. BOX 8292
City-St-Zip: JACKSONVILLE, FL 32239 US

Title: D
Name: DORTCH, EVA
Address: 3844 BOLT AVENUE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D
Name: WADDELL, WARREN
Address: 11051 READING ROAD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: P
Name: TATHAM, KARL
Address: 11820 JOHN WILLIAMS TERRACE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: D
Name: BRANT, WILLIAM P
Address: 50 N. LAURA ST, STE 2750
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: D
Name: POWE-JONES, VERONICA
Address: 12327 RALEIGH RIDGE DRIVE SOUTH
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: KARL A. TATHAM   P   02/25/2010
Electronic Signature of Signing Officer or Director   Date