

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000639

FILED
Apr 30, 2008
Secretary of State

Entity Name: FIRST COAST HUNTER JUMPER ASSOCIATION, INC.

Current Principal Place of Business:

1282 ARDMORE ST
ST AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

1282 ARDMORE ST
ST AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 59-3668602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSHNELL & COMPANY, P.A.
11555 CENTRAL PARKWAY
SUITE 101
JACKSONVILLE, FL 32224 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: P () Delete
Name: WINES, NANCY
Address: 1844 WERFORD WAY
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: RUNK, PATTY
Address: 1282 ARDMORE ST
City-St-Zip: ST AUGUSTINE, FL 32092

Title: EXS () Delete
Name: CONKEY, GRETCHEN
Address: 2540 STERLING OAKS CT
City-St-Zip: ORANGE PARK, FL 32073

Title: S () Delete
Name: HALEY, SUZANNE
Address: 12909 MANDARIN PT LN
City-St-Zip: JACKSONVILLE, FL 32223

Title: BM () Delete
Name: LAHEY, CHARLENE
Address: 157 ALDERSGATE ST
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: BM () Delete
Name: SADLER, DIANE
Address: 6448 SHERRY LANE
City-St-Zip: ST AUGUSTINE, FL 32095

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: BM (X) Change () Addition
Name: CONKEY, GRETCHEN
Address: 2540 STERLING OAKS CT
City-St-Zip: ORANGE PARK, FL 32073

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: BM (X) Change () Addition
Name: DONAHUE, KIMBERLY
Address: 10673 QUAIL RIDGE
City-St-Zip: PONTE VEDRA, FL 32081

Title: EXS (X) Change () Addition
Name: SADLER, DIANE
Address: 6448 SHERRY LANE
City-St-Zip: ST AUGUSTINE, FL 32095

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: PATTY RUNK

T

04/30/2008

Electronic Signature of Signing Officer or Director

Date