

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000696

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** JACKSONVILLE JAGUARS BOOSTER CLUB, INC.

**Current Principal Place of Business:**

6501 ARLINGTON EXPRESSWAY  
SUITE B152  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

6501 ARLINGTON EXPRESSWAY  
SUITE B152  
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

**FEI Number:** 59-3300239

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HENTSCHEL, GEORGE P CPA  
3649 CROWN POINT CT  
JACKSONVILLE, FL 32257 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: PRES  
Name: ERLANDSON, DAN  
Address: 6501 ARLINGTON EXPRESSWAY #B152  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: VP  
Name: RIGGS, LINDA  
Address: 6501 ARLINGTON EXPRESSWAY #B152  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: T  
Name: GOODWIN, ANDREA  
Address: 6501 ARLINGTON EXPRESSWAY #B152  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: D  
Name: CARMAN, LYNN  
Address: 6501 ARLINGTON EXPRESSWAY #B152  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: D  
Name: WELDON, KAREN  
Address: 6501 ARLINGTON EXPRESSWAY #B152  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: D  
Name: STURGESS, SHARON  
Address: 6501 ARLINGTON EXPRESSWAY #B152  
City-St-Zip: JACKSONVILLE, FL 32211 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: ANDREA L GOODWIN

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04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date