

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2008 8:00 am
Secretary of State

02-27-2008 90019 042 ****61.25

DOCUMENT # N94000003293	
1. Entity Name DUVAL LAWYERS ASSOCIATION, INC.	

Principal Place of Business 3182 JULINGTON CREEK ROAD JACKSONVILLE FL 32223	Mailing Address 3182 JULINGTON CREEK ROAD JACKSONVILLE FL 32223
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number NO-T APPLICABLE	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BRANCH, VERNON 3182 JULINGTON CREEK ROAD JACKSONVILLE FL 32223	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE R. Vernon Branch DATE 2-19-08
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent Signature required when completing)

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIALORSI, JOHN C 3723 BUCKSKIN TRL WEST JACKSONVILLE FL 32277 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BRANCH, VERNON 3182 JULINGTON CREEK ROAD JACKSONVILLE FL 32223 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRADDOCK, D.L. 2500 LYNNHAVEN TERRACE JACKSONVILLE FL 32223 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition BRADDOCK, D.L. 10742 WAVERLY BLUFF Way JACKSONVILLE, FL 32223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. Vernon Branch STD 2-19-08 904/268-5878