

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000471

FILED
Mar 21, 2005
Secretary of State

Entity Name: NORTH JACKSONVILLE, YOUTH DEVELOPMENT CORPORATION

Current Principal Place of Business:

5559 NORWOOD AVE
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

2447 TOWN SQ DR
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3293612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, DEWITT L JR
2447 TOWN SQUARE DR
JACKSONVILLE, FL 32216 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: PDA () Delete
Name: COOPER, DEWITT L JR
Address: 2447 TOWNSQUARE DR
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: COOPER, STACEY
Address: 2447 TOWNSQUARE DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: T () Delete
Name: WHITE, STANLEY
Address: 1432 CARBONDALE CT
City-St-Zip: JACKSONVILLE, FL

Title: T () Delete
Name: COOPER, PATRICIA S
Address: 2447 TOWN SQ DR
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: THOMAS, FRED
Address: 2021 ART MUWEUM DR
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEWITT L COOPER JR

DIR

03/21/2005

Electronic Signature of Signing Officer or Director

Date