

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001018

FILED
May 01, 2008
Secretary of State

Entity Name: PUTNAM COUNTY FAIR AUTHORITY, INC.

Current Principal Place of Business:

117 YELVINGTON RD
EAST PALATKA, FL 321318892

New Principal Place of Business:

Current Mailing Address:

PO BOX 400
EAST PALATKA, FL 321318892

New Mailing Address:

FEI Number: 59-3232490 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NEWBOLD, J R III
610 OLD HIGHWAY 17
CRESCENT CITY, FL 32112 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: P () Delete
Name: NEWBOLD, J R III
Address: 610 OLD HIGHWAY 17
City-St-Zip: CRESCENT CITY, FL 32112

Title: VP () Delete
Name: BUSH, FRANK
Address: 1062 SOUTH STATE RD 19
City-St-Zip: PALATKA, FL 32117

Title: T () Delete
Name: MOTES, GWEN
Address: 154 HUNTER RD
City-St-Zip: PALATKA, FL 32177

Title: S () Delete
Name: WELLS, MARY KAY
Address: PO BOX 481
City-St-Zip: HOLLISTER, FL 32147

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: S (X) Change () Addition
Name: WILSON, HERB
Address: 2300 REID STREET
City-St-Zip: PALATKA, FL 32177

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: J. R. NEWBOLD III

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date