

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000002095

FILED
Apr 19, 2003
Secretary of State

Entity Name: THE RIVER CITY PROWLERS FAN CLUB, INC.

Current Principal Place of Business:

4446 BREAKWATER ROW WEST
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

4446 BREAKWATER ROW WEST
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3373747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOON, JANE
4446 BREAKWATER ROW W
JACKSONVILLE, FL 32225 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: D () Delete
Name: MOON, JANE
Address: 4446 BREAKWATER ROW WEST
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: FERRIE, FRANK
Address: 1153 RAMALLAH ROAD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: TAYLOR, THOMAS
Address: POST OFFICE BOX 37906 N/A
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: FENNIMORE, TERESA
Address: 13358 CURRATUCK DRIVE
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: SPIERS, ED
Address: 1321 GRANDVIEW DRIVE
City-St-Zip: JACKSONVILLE, FL

Title: D (X) Delete
Name: BILDY, JOHN
Address: 6560 PINE SUMMIT DR
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOON, JANE
Address: 4446 BREAKWATER ROW WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: BAEZ, BOB
Address: 3169 ASHRIDGE DR.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: MOON, ARTHUR
Address: 11124 FT CAROLINE CREST DR.
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: FENNIMORE, TERESA
Address: 13358 CURRITUCK DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: BLIDY, JOHN
Address: 6560 PINE SUMMIT DR.
City-St-Zip: JACKSONVILLE, FL 32211

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: JANE E. MOON

PRES

04/19/2003

Electronic Signature of Signing Officer or Director

Date