2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2008
Secretary of State

DOCUMENT# N96000002352

Entity Name: JACKSONVILLE BEACH BASEBALL ASSOCIATION, INC.

Current Principal Place of Business:

361 PENMAN ROAD
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 50042
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 59-3370216 **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:

BOYD, THOMAS A JR ESQ
6817 SOUTHPOINT PARKWAY
SUITE 1801
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: PD ( ) Delete
Name: WARD, ROBERT
Address: 4260 ANSON DR
City-St-Zip: JACKSONVILLE, FL 32246

Title: V ( ) Delete
Name: BALKE, BEN
Address: 13076 CHETS CREEK DR SOUTH
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD ( ) Delete
Name: FARMER, LISA
Address: 14225 FALCON CREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD ( ) Delete
Name: CALLIHAN, JOHN
Address: 1933 1315 PT W
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KOMAROSKI, PETE
Address: 2008 OCEAN DR S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: V (X) Change ( ) Addition
Name: KNIGHT, PALMER
Address: 3693 WEXFORD HOLLOW RD E
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD (X) Change ( ) Addition
Name: ISAAC, ROBERT
Address: 42 TALLWOOD RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TD (X) Change ( ) Addition
Name: CALLIHAN, JOHN
Address: 1933 IBIS POINT LANE
City-St-Zip: JACKSONVILLE, FL 32224

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: JOHN CALLIHAN TD 09/03/2008
Electronic Signature of Signing Officer or Director — Date