## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000003631

Entity Name: RIVER CITY SINGLES CLUB, INC

FILED Mar 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1501 HENDRICKS AVE JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

6523 STARLING AVE 196 LIGE BRANCH LN JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32259

FEI Number: 59-3440582 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLARDY, JOSEPHINE L 6523 STARLING AVE JACKSONVILLE, FL 32216 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:

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Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: PRES (X) Change ( ) Addition Name: DUFFY, THERESA Name: WELLMAN, BARBARA Address: 6109 WARDEN CIRCLE Address: 196 LIGE BRANCH LN City-St-Zip: SANDERSON, FL 32087 City-St-Zip: JACKSONVILLE, FL 32259

 Name:
 WEBER, PENNY
 Name:
 CLARDY, JOSEPHINE

 Address:
 5566 OAK CROSSING DR
 Address:
 6523 STARLING AVE

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 JACKSONVILLE, FL 32216

Title: DT ( ) Delete Title: TREA (X) Change ( ) Addition

 Name:
 CLARDY, JOSEPHINE
 Name:
 DUMAS, JOYCE

 Address:
 6523 STARLING AVE
 Address:
 MELISSA CT WEST

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: DS ( ) Delete Title: SEC (X) Change ( ) Addition

Name: DUMAS, JOYCE Name: ANTONIELLO, PAT

 Address:
 MELISSA DR
 Address:
 3750 SILVER BLUFF BLVD#1806

 City-St-Zip:
 JACKSONVILLE, FL 32210D
 City-St-Zip:
 ORANGE PARK, FL 32065

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPHINE CLARDY VP 03/09/2007