

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000003889

FILED
Sep 12, 2002
Secretary of State

Entity Name: NORTH FLORIDA HOCKEY ASSOCIATION, INC.

Current Principal Place of Business:

3605 PHILLIPS HIGHWAY
MARKET SQUARE MALL
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5128
JACKSONVILLE, FL 322475128 US

New Mailing Address:

FEI Number: 59-3389566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEENAN, EDWARD
2063 BROADOAK DRIVE
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: PD () Delete
Name: HARRIMAN, FRANK S
Address: 2063 BROAD OAK DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: VPD () Delete
Name: LYNCH, PAUL J
Address: 4441 LACEWING CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: SD () Delete
Name: THOMPSON, ROCKY
Address: 405 F STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: TD () Delete
Name: STEWART, KIRSTI
Address: 8119 GREEN GLADE
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: MCLEAN, DWAYNE
Address: 1825 NORWAY DR
City-St-Zip: ORANGE PARK, FL 32003

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: PAUL LYNCH

VPD

09/12/2002

Electronic Signature of Signing Officer or Director

Date