

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004019

FILED  
Mar 05, 2005  
Secretary of State

Entity Name: FIRST COAST POST POLIO SUPPORT GROUP, INC.

## Current Principal Place of Business:

85227 EADY LANE  
YULEE, FL 32097 US

## New Principal Place of Business:

13119 BLACKHAWK TRAIL CT  
JACKSONVILLE, FL 32225 US

## Current Mailing Address:

85227 EADY LANE  
YULEE, FL 32097 US

## New Mailing Address:

13119 BLACKHAWK TRAIL CT  
JACKSONVILLE, FL 32225 US

FEI Number: 59-3395813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOYD, BETTY  
85227 EADY LANE  
YULEE, FL 32097 US

## Name and Address of New Registered Agent:

ASKWITH, JANICE  
13119 BLACKHAWK TRAIL CT  
JACKSONVILLE, FL 32225 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: JANICE ASKWITH

03/05/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOYD, BETTY  
Address: 1815 EADY LANE  
City-St-Zip: YULEE, FL 32097

Title: VP ( ) Delete  
Name: ECKERT, PHILLIPPA  
Address: 3757 BUCKSTEIN TRAIL WEST  
City-St-Zip: JACKSONVILLE, FL 32277

Title: S ( ) Delete  
Name: FERGUSON, HELEN  
Address: 1864 CHRISTOPHER POINT RD W  
City-St-Zip: JACKSONVILLE, FL 32217

Title: T ( ) Delete  
Name: RAMSEY, MARY  
Address: 7425 HENNESSY ROAD  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete  
Name: BRYNILDSON, DAVID A  
Address: 10532 TANGLEWILDE DR W  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete  
Name: RAKER, JOE  
Address: 1608 S EDGEWOOD AVE  
City-St-Zip: JACKSONVILLE, FL 32205

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HUTCHINSON, KATHY  
Address: 4762 EMPIRE AVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP (X) Change ( ) Addition  
Name: ASKWITH, JANICE  
Address: 13119 BLACKHAWK TRAIL CT  
City-St-Zip: JACKSONVILLE, FL 32225

Title: S (X) Change ( ) Addition  
Name: NAHM, EULIE  
Address: 13047 ROCKY RIVER ROAD N  
City-St-Zip: JACKSONVILLE, FL 32224

Title: T (X) Change ( ) Addition  
Name: NAHM, EULIE  
Address: 13047 ROCKY RIVER ROAD N  
City-St-Zip: JACKSONVILLE, FL 32224

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: DAVID BRYNILDSON

D

03/05/2005

Electronic Signature of Signing Officer or Director

Date