2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004610

FILED Mar 26, 2006 Secretary of State

Entity Name: NORTH FLORIDA MILITARY OFFICIALS ASSOCIATION, INC.

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

FLEET RESERVE CLUB OF JACKSONVILLE 5391 COLLINS ROAD JACKSONVILLE, FL 32244

New Mailing Address: Current Mailing Address:

C/O 2933 W 4TH ST JACKSONVILLE, FL 322542420 US

FEI Number: 59-3051939 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:

BEACH, JESSE JACKSON, GENE 7799 ENDERBY AVE E. 5041 ANDREWS ST

JACKSONVILLE, FL 32254 JACKSONVILLE, FL 32244 US 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: GENE JACKSON 03/26/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

SMITH, KENT HEALD, DAVID Name: Name:

1273 LE BLANC RD. Address: 880 COLLINSWOOD DR Address:

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: JACKSONVILLE, FL 322250854

Title: STD () Delete Title: () Change () Addition

BOOKER, DOUGLAS D Name: Name: Address: 2933 WEST FOURTH ST. Address: City-St-Zip: JACKSONVILLE, FL 322542420 City-St-Zip:

Title: () Delete Title: PD (X) Change () Addition

JACKSON, GENE JACKSON, GENE Name: Name: 5041 ANDREWS ST. 5041 ANDREWS ST. Address: Address: City-St-Zip: JACKSONVILLE, FL 32254 City-St-Zip: JACKSONVILLE, FL 32254

Title: VD () Delete Title: D (X) Change () Addition

Name: MULLEN, DENNIS Name: MULLEN, DENNIS Address: 2250 SANDY CT. Address: 2250 SANDY CT. City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073

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

BEACH, JESSE BEACH, JESSE Name: Name: 7799 ENDERBY AVE E 7799 ENDERBY AVE E Address: Address: City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32244

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: DOUGLAS D BOOKER STD 03/26/2006