

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004610

FILED
Apr 05, 2007
Secretary of State

Entity Name: NORTH FLORIDA MILITARY OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3051939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, GENE
5041 ANDREWS ST
JACKSONVILLE, FL 32254 US

Name and Address of New Registered Agent:

BERRY, ALLEN
435 SAN CLEMENTI DR
ORANGE PARK, FL 320087833 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: ALLEN BERRY

04/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HEALD, DAVID
Address: 880 COLLINSWOOD DR
City-St-Zip: JACKSONVILLE, FL 322250854

Title: STD () Delete
Name: BOOKER, DOUGLAS D
Address: 2933 WEST FOURTH ST.
City-St-Zip: JACKSONVILLE, FL 322542420

Title: PD () Delete
Name: JACKSON, GENE
Address: 5041 ANDREWS ST.
City-St-Zip: JACKSONVILLE, FL 32254

Title: D () Delete
Name: MULLEN, DENNIS
Address: 2250 SANDY CT.
City-St-Zip: ORANGE PARK, FL 32073

Title: VD () Delete
Name: BEACH, JESSE
Address: 7799 ENDERBY AVE E
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SEAY, JOHNNY
Address: 8131 LOCH LOMOND LN
City-St-Zip: JACKSONVILLE, FL 32244

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: BERRY, ALLEN
Address: 435 SAN CLEMENTI DR
City-St-Zip: ORANGE PARK, FL 32008 78

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 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

04/05/2007

Electronic Signature of Signing Officer or Director

Date