

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004682

FILED
Apr 05, 2010
Secretary of State

Entity Name: PABLO POINT CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

PPCA
71 SAN PABLO RD. N
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

Current Mailing Address:

PPCA
71 SAN PABLO RD. N
JACKSONVILLE, FL 32225 US

New Mailing Address:

FEI Number: 04-3610491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, KATHY
365 PABLO POINT 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: CPD
Name: HAIRSTON, PATRICIA
Address: PPCA, 71 SAN PABLO RD. N
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: BRITT, VALERIE
Address: PPCA, 71 SAN PABLO RD. N
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD
Name: BLOUNT, EVELYN
Address: PPCA, 71 SAN PABLO RD. N
City-St-Zip: JACKSONVILLE, FL 32225

Title: T
Name: STRAIGHT, NANCY M
Address: PPCA, 71 SAN PABLO RD. N
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: DVP
Name: BROADWAY, SARAH
Address: PPCA, 71 SAN PABLO RD. N
City-St-Zip: JACKSONVILLE, FL 32225

I hereby 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 all other like empowered.

SIGNATURE: NANCY M. STRAIGHT

T

04/05/2010

Electronic Signature of Signing Officer or Director

Date