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May 10, 1999 8:00 am
Secretary of State

05-10-1999 90246 037 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000001431

1. Corporation Name

THE WESTSIDE AREA RESIDENTS ASSOCIATION, INC.

Principal Place of Business

5327 ATTLEBORO STREET
JACKSONVILLE FL 32205

Mailing Address

P O BOX 37049
JACKSONVILLE FL 32236
US

5 6 8 5 1 9
 560519 - 90068 - 36



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	03/10/1997
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	NOT APPLICABLE
24 Country	30 Country	Applied For
		Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

GOODMAN, JONATHAN H ESO
1377 CASSAT AVENUE
JACKSONVILLE FL 32205

10. Name and Address of New Registered Agent

81 Name **JESSE WILSON, JR**
 82 Street Address (P.O. Box Number is Not Acceptable)
777 SOUTH LANE AVENUE
 83
 84 City **JACKSONVILLE** FL 85 Zip Code **32205**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Jesse Wilson, Jr.
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

5-27-1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MALPHURS, RALPH J SR	1.2 NAME	
STREET ADDRESS	5327 ATTLEBORO ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32205	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MALPHURS, ROGER F	2.2 NAME	
STREET ADDRESS	5068 KINGSBURY ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32205	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	☒ Change ☐ Addition
NAME	KELLEY, CHARLES W	3.2 NAME	
STREET ADDRESS	790 S ELLIS RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32205	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	☒ Change ☐ Addition
NAME	STRALEY, BRAD	4.2 NAME	
STREET ADDRESS	7882 KNOLL DR N	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32221	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	☐ Change ☒ Addition
NAME	MALPHURS, RALPH J JR	5.2 NAME	
STREET ADDRESS	2234 CYPRESS LANDING	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32233	5.4 CITY-ST-ZIP	
TITLE	SD	6.1 TITLE	☐ Change ☒ Addition
NAME	MCCORKEL, B J	6.2 NAME	
STREET ADDRESS	5683 VISTA VERDE	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32244	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ralph J. Malphurs*
 Signature, typed or printed name of signing officer or director

APRIL 24 1999 (904) 786-9546
 Daytime Phone

CR2E037 (1/98)

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THE WESTSIDE AREA RESIDENTS ASSOCI

<u>Office</u>	<u>Name</u>	<u>Address</u>
Treasurer	Docia Mayfield	5420 Kingsbury St Jacksonville, FL 32205
Sargent at Arms	Floyd Evans	5463 Royce Ave. Jacksonville, FL 32205
Chaplain	Marvin Jackson	8200 Herlong Road Jacksonville, FL 32210
Historian	Ruby Washburne	5420 Kingsbury St Jacksonville, FL 32205
Parliamentarian	Doris Wilson's	1425 Delmar St Jacksonville, FL 32205