

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003191

FILED
Feb 10, 2004
Secretary of State

Entity Name: JACKSONVILLE STORM YOUTH HOCKEY ASSOCIATION, INC.

Current Principal Place of Business:

1627 ALACHUA ST.
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

3605 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32207

Current Mailing Address:

1627 ALACHUA ST.
FERNANDINA BEACH, FL 32034

New Mailing Address:

PO BOX 6000471
JACKSONVILLE, FL 32260-047

FEI Number: 59-3450973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HACKNEY, ELIZABETH M
1627 ALACHUA ST.
FERNANDINA BEACH, FL 32034

Name and Address of New Registered Agent:

MEIXNER, MARK A
1277 CUNNINGHAM CREEK DRIVE
JACKSONVILLE, FL 32259

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: MARK A MEIXNER

02/10/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUGHES, JAMES
Address: 149 IVY LAKES DR.
City-St-Zip: JACKSONVILLE, FL 32259

Title: DTD () Delete
Name: HACKNEY, BETH
Address: 1627 ALACHUA ST
City-St-Zip: FERNANDINA BCH, FL 32034

Title: VPD () Delete
Name: JONAS, STEVE
Address: 4402 LAEEWING CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MURRAY, JACK
Address: 1700 CHECKERBERRY WAY
City-St-Zip: JACKSONVILLE, FL 32259

Title: DTD (X) Change () Addition
Name: MEIXNER, MARK
Address: 1277 CUNNINGHAM CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: VPD (X) Change () Addition
Name: MACCURREACH, ALLAN
Address: 4970 MAYBANK WAY
City-St-Zip: JACKSONVILLE, FL 32225

Title: VPD () Change (X) Addition
Name: HUGHES, JAMES
Address: 149 IVY LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

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: MARK A MEIXNER

DTD

02/10/2004

Electronic Signature of Signing Officer or Director

Date