2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003191

FILED May 29, 2008 Secretary of State

Entity Name: JACKSONVILLE STORM YOUTH HOCKEY ASSOCIATION, INC.

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

12293 ARBOR DRIVE

PONTE VEDRA BEACH, FL 32082

Current Mailing Address: New Mailing Address:

12293 ARBOR DRIVE

PONTE VEDRA BEACH, FL 32082

FEI Number: 59-3450973 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LARSON, RICHARD N MORLEY, JOHN W

12293 ARBOR DRIVE 337 SUMMERSET DRIVE

PONTE VEDRA BEACH, FL 32082 US JACKSONVILLE, FL 32259 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: JOHN W MORLEY 05/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LARSON, RICHARD N
 Name:
 MORLEY, JOHN W

 Address:
 12293 ARBOR DRIVE
 Address:
 337 SUMMERSET DRIVE

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32028
 City-St-Zip:
 JACKSONVILLE, FL 32259

Title: VPD () Delete Title: VPD (X) Change () Addition Name: MURRAY, JACK Name: LARSON, RICK

Address: 1700 CHECKERBERRY WAY Address: 12293 ARBOR DRIVE

City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: BRD () Delete Title: () Change () Addition

 Name:
 MACCURRACH, ALLAN
 Name:

 Address:
 4970 MAYBANK WAY
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

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

 Name:
 FERLIN, MARK
 Name:
 DENTEL, ROBERT F

 Address:
 4556 SWILCAN BRIDGE LANE NORTH
 Address:
 1312 HOLMES LANDING DR

 City-St-Zip:
 JACKSONVILLE, FL 32224
 City-St-Zip:
 ORANGE PARK, FL 32003

Title: TRS () Delete Title: () Change () Addition

 Name:
 DAVIDSON, LAURIE K
 Name:

 Address:
 12293 ARBOR DRIVE
 Address:

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32028
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LAURIE K DAVIDSON TRS 05/29/2008