

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000003438

FILED
Oct 08, 2006
Secretary of State

Entity Name: JACKSONVILLE CHECKER CLUB INC.

Current Principal Place of Business:

3101 N. MYRTLE AVE
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

3101 N. MYRTLE AVE
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 59-3490820 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MALLOY, ULYSSES
3101 N. MYRTLE AVE
JACKSONVILLE, FL 32209 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: JIMMIE FREEMAN JR

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MALLOY, ULYSSES
Address: 3101 N. MYRTLE AVE
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP () Delete
Name: FREEMAN, JIMMIE L
Address: 3101 N. MYRTLE AVE
City-St-Zip: JACKSONVILLE, FL 32209

Title: MD () Delete
Name: BRIGHT, ODELL
Address: 3101 N. MYRTLE AVE
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: BRIGHT, ODELL
Address: 3101 N. MYRTLE AVE
City-St-Zip: JACKSONVILLE, FL 32209

Title: RS () Delete
Name: GIRADEAU, EMMETT
Address: 3101 N. MYRTLE AVE
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JIMMIE FREEMAN JR

VP

10/08/2006

Electronic Signature of Signing Officer or Director

Date