

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004366

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: GATOR CLOWNS OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

PO BOX 54161  
JACKSONVILLE, FL 322381643 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 54161  
JACKSONVILLE, FL 322381643 US

**New Mailing Address:**

FEI Number: 59-2277993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THODE, DEBORAH  
158 ANNANDALE DR E  
JACKSONVILLE, FL 32225 US

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

WYLAND, SUZETTE  
3648 MORNING MEADOW LANE  
ORANGE PARK, FL 32073 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: SUZETTE WYLAND

04/19/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: THODE, DEBORAH  
Address: 158 ANNANDALE DR E  
City-St-Zip: JACKSONVILLE, FL 32225

Title: 1VD ( ) Delete  
Name: BEAVER, NANCY  
Address: 1819 ASHMORE GREEN DR  
City-St-Zip: JACKSONVILLE, FL 32246

Title: 2VD ( ) Delete  
Name: DICK, J.B.  
Address: 166 ANDIA MICHELLE CT S  
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD ( ) Delete  
Name: WYLAND, SUZETTE  
Address: 3648 MORNING MEADOW LANE  
City-St-Zip: ORANGE PARK, FL 32073

Title: TD ( ) Delete  
Name: WOMBLE, CAROL ANN  
Address: 1221 1ST ST S., #10-A  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WYLAND, SUZETTE  
Address: 3648 MORNING MEADOW LANE  
City-St-Zip: ORANGE PARK, FL 32073 US

Title: 1VD (X) Change ( ) Addition  
Name: BEAVER, NANCY  
Address: 1819 ASHMORE GREEN DR  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: 2VD (X) Change ( ) Addition  
Name: THODE, DEBORAH  
Address: 158 ANNANDALE DR. E  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: SD (X) Change ( ) Addition  
Name: LOVETT, SUE  
Address: 5029 CHADROE RD.  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: TD (X) Change ( ) Addition  
Name: WOMBLE, CAROL ANN  
Address: 1221 1ST ST S., #10-A  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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: SUZETTE WYLAND

PD

04/19/2004

Electronic Signature of Signing Officer or Director

Date