

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004879

FILED
Apr 18, 2004
Secretary of State**Entity Name:** NEXT GENERATION OF RUNNERS YOUTH TRACK CLUB INC.**Current Principal Place of Business:**3721 SW 19TH ST
GAINESVILLE, FL 32608**New Principal Place of Business:****Current Mailing Address:**3721 SW 19TH ST
GAINESVILLE, FL 32608**New Mailing Address:****FEI Number:** 59-3470051**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**JOHNSON, JACQUELINE D
3721 SW 19TH ST
GAINESVILLE, FL 32608 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: JOHNSON, JACQUELINE
Address: 3721 SW 19TH ST
City-St-Zip: GAINESVILLE, FL 32608**Title:** TD () Delete
Name: NEWSOM, JOHN
Address: 3721 SW 19TH ST
City-St-Zip: GAINESVILLE, FL 32608**Title:** SD () Delete
Name: CUE, SHERRY
Address: 433 SE 15TH ST
City-St-Zip: GAINESVILLE, FL 32641**Title:** S () Delete
Name: CUE, LINDA D
Address: 433 SE 15TH ST
City-St-Zip: GAINESVILLE, FL 32641**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:

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: JACQUELINE D. JOHNSON

PD

04/18/2004

Electronic Signature of Signing Officer or Director

Date