

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006502

FILED  
Feb 11, 2008  
Secretary of State

**Entity Name:** THE JACKSONVILLE POP WARNER JUNIOR JAGUARS BOWL, INC.

**Current Principal Place of Business:**

6847 TANGO LANE N.  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

6847 TANGO LANE N.  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 59-3476024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONNORS, DENNIS B  
6847 TANGO LANE N.  
JACKSONVILLE, FL 32210 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: D ( ) Delete  
Name: CONNORS, DENNIS B  
Address: 6847 TANGO LANE N.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: NEWMAN, EARL  
Address: 1350 NORTH DEGROVE ROAD  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D ( ) Delete  
Name: ALFORD, M. DUANE  
Address: 5724 CRESTVIEW RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: MOSCHELLA, DIANE  
Address: 1193 KNOLL DR. W.  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D ( ) Delete  
Name: BUTLER, JON  
Address: 586 MIDDLETOWN BLVD. C-100  
City-St-Zip: LANGHOM, PA 19047

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

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

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

Title: D (X) Change ( ) Addition  
Name: ALFORD, M. DUANE  
Address: 5736 CRESTVIEW RD  
City-St-Zip: JACKSONVILLE, FL 32210

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 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: M. DUANE ALFORD

D

02/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date