

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003505

FILED
May 30, 2009
Secretary of State

Entity Name: SCENIC AMERICA-FLORIDA CHAPTER, INC.

Current Principal Place of Business:

4401 EMERSON STREET
SUITE 10
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4401 EMERSON STREET
SUITE 10
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3516846 **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:

BRINTON, WILLIAM D
1835 CHALLEN AVE.
JACKSONVILLE, FL 32205 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CSD () Delete
Name: BRINTON, WILLIAM D
Address: 1835 CHALLEN AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: PD () Delete
Name: JONSON, WILLIAM C
Address: 2694 REDFORD COURT W
City-St-Zip: CLEARWATER, FL 34621

Title: TVD () Delete
Name: HILLIARD, MARION B
Address: 2902 GREENRIDGE RD
City-St-Zip: ORANGE PARK, FL 32073

Title: VD () Delete
Name: PIERPONT, LESLIE H
Address: 4157 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: VD () Delete
Name: STARKEY, KATHRYN
Address: 19028 ALICO PASS
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VD () Delete
Name: JARMAN, TRAVIS R
Address: 4971 61ST AVENUE S
City-St-Zip: SAINT PETERSBURG, FL 33715

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:

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: MARION B. HILLIARD

TVD

05/30/2009

Electronic Signature of Signing Officer or Director

Date