## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000003728

Entity Name: KINLOCK CIVIC ASSOCIATION, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6563 THURGOOD CIR., EAST

JACKSONVILLE, FL 32219

6455 MANHATTAN DRIVE
JACKSONVILLE, FL 32219

JACKSONVILLE, FL 32219

Current Mailing Address: New Mailing Address:

6563 THURGOOD CIR., EAST 6455 MANHATTAN DRIVE JACKSONVILLE, FL 32219 JACKSONVILLE, FL 32219

FEI Number: 59-3525034 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CLAYTON, ERNEST

6563 THURGOOD CIR., EAST

JACKSONVILLE, FL 32219 US

SIMS, EARL A

6455 MANHATTAN DRIVE

JACKSONVILLE, FL 32219 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: EARL A. SIMS 04/14/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 CLAYTON, ERNEST
 Name:
 SIMS, EARL A

 Address:
 6563 THURGOOD CIR., EAST
 Address:
 6455 ,MANHATTAN DRIVE

Address: 6563 THURGOOD CIR., EAST Address: 6455 ,MANHATTAN DRIVE City-St-Zip: JACKSONVILLE, FL 32219 City-St-Zip: JACKSONVILLE, FL 32219

Title: VD ( ) Delete Title: TRES (X) Change ( ) Addition Name: REID, NORRIS Name: GLOSTER, JAMES R

Address: 6519 THURGOOD CIR Address: 5726 KINLOCK DRIVE
City-St-Zip: JACKSONVILLE, FL 32219

Title: AS () Delete Title: AS (X) Change () Addition

 Name:
 JEFFERSON, GLORIA
 Name:
 LILLIE, MOSLEY F

 Address:
 6518 KINLOCK DR
 Address:
 6518 KINLOCK DR

 City-St-Zip:
 JACKSONVILLE, FL
 City-St-Zip:
 JACKSONVILLE, FL

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: EARL A. SIMS PRES 04/14/2009