

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001197

FILED
Mar 24, 2007
Secretary of State

Entity Name: GREATER JACKSONVILLE YOUTH ATHLETIC COUNCIL, INC.

Current Principal Place of Business:

851 N. MARKET STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

851 N. MARKET STREET
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-3412094

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 NORTH
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: ELLISON, ALBERT
Address: 5310 REDERICKSBURG AVE.
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: SUBER, JAMES L
Address: 12846 WANDA LANE
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: ADKINS, BILL
Address: 3005 CLYDE DR.
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONNORS, DENNIS B
Address: 6847 TANGO LANE N
City-St-Zip: JACKSONVILLE, FL 32210

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 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: DENNIS B. CONNORS

D

03/24/2007

Electronic Signature of Signing Officer or Director

Date