

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90098 026 ****70.00

DOCUMENT # N99000001326

1. Entity Name
GLEANERS DISPATCH, INC.



Principal Place of Business
**8207 103RD STREET
JACKSONVILLE, FL 32210-6553**

Mailing Address
**8207 103RD STREET
JACKSONVILLE, FL 32210-6553**

50010951



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04082006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-3563107

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ZVARA, WILLIAM L
4810 ARAPAHOE AVE
JACKSONVILLE, FL 32210**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CAIN, JOHN
2603 ART MUSEUM, # 148
JACKSONVILLE, FL 32207** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CAIN, John
P.O. Box 138
WACISSA, FL 32361** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DM
FOUNTAIN, H D
8230 APRIL ST
JACKSONVILLE, FL 322441104** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
FOUNTAIN, H. David
8230 April St
JACKSONVILLE, FL 32244-1104** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DST
FOUNTAIN, TERRY L
8230 APRIL ST
JACKSONVILLE, FL 322441104** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CP
FREEMAN, HENRY
4737 CARLISLE ROAD
JACKSONVILLE, FL 32210** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DC
FREEMAN, HENRY
4737 Carlisle Rd.
JACKSONVILLE, FL 32210** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
SMITH, RICHARD L
7319 BUNION DR
JACKSONVILLE, FL 322222005** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
Smith, Richard L.
7319 Bunion Dr.
JACKSONVILLE, FL 32222-2005** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
QUINN, CLINT
2770 HOLLY POINT RD W
ORANGE PARK, FL 32073** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Terry L. Fountain **TERRY L. Fountain**

Date

4/10/06 (904) 777-6344

Daytime Phone #

ATTACHMENT

~~50010951~~
~~#N99000001326~~

ADDENDUM

2006 Not-For-Profit Corporation
ANNUAL REPORT

Block 11 - Additions to Directors in Block 10

| | |
|----------------|------------------------|
| Title | D |
| Name | WRIGHT, MICHAEL |
| Street Address | 2419 Patsy Ann Drive |
| City-ST-Zip | Jacksonville, FL 32207 |

| | |
|----------------|-------------------------|
| Title | D |
| Name | BRASHEARS, FRANK |
| Street Address | 1105 Carlotta Road West |
| City-ST-Zip | Jacksonville, FL 32211 |

| | |
|----------------|-------------------------|
| Title | D |
| Name | ROBBINS, JACKIE |
| Street Address | 5921 West Beaver Street |
| City-ST-Zip | Jacksonville, FL 32254 |