


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90041 027 \*\*\*\*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**

**40067648**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

04122008 Chg-NP CR2E037 (12/06)

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

7. Name and Address of New Registered Agent  
 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$81.25 Due by May 1, 2008**

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	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRASHEARS, FRANK		NAME		
STREET ADDRESS	1105 CARLOTTA ROAD WEST		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32211		CITY-ST-ZIP		
TITLE	DP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOUNTAIN, H. DAVID		NAME		
STREET ADDRESS	8230 APRIL ST		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 322441104		CITY-ST-ZIP		
TITLE	DST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOUNTAIN, TERRY L		NAME		
STREET ADDRESS	8230 APRIL ST		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 322441104		CITY-ST-ZIP		
TITLE	DC	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREEMAN, HENRY		NAME		
STREET ADDRESS	4737 CARLISLE ROAD		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32210		CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, RICHARD L		NAME		
STREET ADDRESS	7319 BUNION DR		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 322222005		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	QUINN, CLINT		NAME		
STREET ADDRESS	2770 HOLLY POINT RD W		STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK, FL 32073		CITY-ST-ZIP		

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 <sup>4/14/08</sup> <sup>(304)</sup> 777-6344

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40067648

**2008 Not-For-Profit Corporation ANNUAL REPORT**

**DOCUMENT # N99000001326 (Continued)**

**11. Additions / Changes to Officers and Directors in 10**

D Addition  
Chaney, George  
7557 Allspice Circle S.  
Jacksonville, FL 32244-7031

D Addition  
Mason, Nathan  
54129 Snyder Road  
Callahan, FL 32011

D Addition  
Miller, Thomas  
7071 103<sup>rd</sup> Street  
Jacksonville, FL 32210

D Addition  
Robbins, Jackie  
5921 W. Beaver Street  
Jacksonville, FL 32254

D Addition  
Sizemore, Shirley  
5302 Monroe Smith Road  
Jacksonville, FL 32210

D Addition  
Waller, Rick  
7046 Ramona Blvd.  
Jacksonville, FL 32205

D Addition  
Wright, Michael  
2419 Patsy Ann Drive  
Jacksonville, FL 32207