

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 01, 2004
Secretary of State**

DOCUMENT# N01000008889

Entity Name: PABLO CREEK POP WARNER FOOTBALL ASSOCIATION INC.

Current Principal Place of Business:

14444 BEACH BLVD., SUITE 18, BOX 247
JACKSONVILLE, FL 32250

New Principal Place of Business:

14286 BEACH BLVD
SUITE 19, BOX 247
JACKSONVILLE, FL 32250

Current Mailing Address:

14444 BEACH BLVD., SUITE 18, BOX 247
JACKSONVILLE, FL 32250

New Mailing Address:

14286 BEACH BLVD
SUITE 19, BOX 247
JACKSONVILLE, FL 32250

FEI Number: 01-0553066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, OLIVER L
5023 DIXIE LANDING DR
JACKSONVILLE, FL 32224 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: DP () Delete
Name: DIXON, OLIVER L
Address: 5023 DIXIE LANDING DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: DV () Delete
Name: CARNEY, TIM
Address: 3726 W PLANTERS CREEK CR
City-St-Zip: JACKSONVILLE, FL 32224

Title: DVS () Delete
Name: MCMAHAN, BILL
Address: 2337 W COUINGTON CREEK DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: DV () Delete
Name: MCMAHAN, LIZ
Address: 2337 W COUINGTON CREEK DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: DV () Delete
Name: SOLOMAN, BOB
Address: 202 PABLO RD
City-St-Zip: PORT VEDRA, FL 32082

Title: T () Delete
Name: DIXON, EDIE
Address: 5023 DIXIE LANDING DR.
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CARNEY, KELLY
Address: 3726 W PLANTERS CREEK CR
City-St-Zip: JACKSONVILLE, FL 32224

Title: DV (X) Change () Addition
Name: MCMAHAN, BILL
Address: 2337 W COUINGTON CREEK DR
City-St-Zip: JACKSONVILLE, FL 32224

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 Section 119.07(3)(i), 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: EDIE DIXON

T

03/01/2004

Electronic Signature of Signing Officer or Director

Date