

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 08, 2005  
Secretary of State**

DOCUMENT# N01000008889

Entity Name: PABLO CREEK POP WARNER FOOTBALL ASSOCIATION INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

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

Title: DV      ( ) 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: SCHOU, TERRY  
Address: 13681 LONGS LANDING ROAD W  
City-St-Zip: JACKSONVILLE, FL 32225

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

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 D DIXON

T

02/08/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date