2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State
03-06-2002 90105 020 ****61.25

DOCUMENT # N10922

1. Entity Name

YULEE ATHLETIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
314 PAGE'S DAIRY RD P. O. BOX 731 YULEE FL 32097	314 PAGE'S DAIRY RD P. O. BOX 731 YULEE FL 32097

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2708076 ☐ 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
SAMUS, VICTOR 199 RIVER OAKS DRIVE FERNANDINA BEACH FL 32034	Name: Vickie Samus Street Address (P.O. Box Number is Not Acceptable): 3729 Pirates Way City: Yulee FL Zip Code: 32097

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.

SIGNATURE: Vicki D Samus, Treas 2/19/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SAMUS, JOE ~~1092 PIRATES PT RD.~~ 3729 Pirates Way YULEE FL 32097	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DALE, ALLEN 2184 HADDOCK RD YULEE FL 32097	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Joanita Johnson 1143 Lana Rd Yulee FL 32097 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SAMUS, VICKIE ~~1092 PIRATES PT RD.~~ 3729 Pirates Way YULEE FL 32097	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ALLEN, CINDY 2184 HADDOCK RD YULEE FL 32097	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Linda Hallmark 553 Miner Rd Yulee FL 32097 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Vicki D Samus SIGNATURE REQUIRED 2/19/02 9043214124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #