

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2004 8:00 am**  
**Secretary of State**

02-09-2004 90049 023 \*\*\*\*70.00

**DOCUMENT # N24012**

1. Entity Name

YOUNG ACHIEVERS SPRINT CLUB, INC.



Principal Place of Business

%CALEB WHITE, JR.  
3931 FERNGLLEN DRIVE  
JACKSONVILLE FL 32211

Mailing Address

%CALEB WHITE, JR.  
3931 FERNGLLEN DRIVE  
JACKSONVILLE FL 32211

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32277-1610

32277-1610

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITE, CALEB JR.  
3931 FERNGLLEN DRIVE  
JACKSONVILLE FL 32211

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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

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 P ☐ Delete  
NAME WHITE, CALEB JR.  
STREET ADDRESS 3931 FERNGLLEN DR.  
CITY-ST-ZIP JACKSONVILLE FL 32277-1610

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

TITLE VP ☐ Delete  
NAME HOLMES-ROBERTSON, ANGELA  
STREET ADDRESS 11745 TORREY PINE CIR.  
CITY-ST-ZIP JACKSONVILLE FL 32218

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

TITLE D ☐ Delete  
NAME RICHARDS, RITA  
STREET ADDRESS 2557 SPRINGLAKE ROAD W.  
CITY-ST-ZIP JACKSONVILLE FL 32210

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

TITLE T ☒ Delete  
NAME BROWN, HENRY  
STREET ADDRESS 2150 LEGER COURT  
CITY-ST-ZIP JACKSONVILLE FL

TITLE T ☒ Change ☐ Addition  
NAME CARMEN A. White  
STREET ADDRESS 14645 MARSHVIEW DR  
CITY-ST-ZIP JACKSONVILLE, Bch, FL 32250

TITLE D ☐ Delete  
NAME HENDERSON, JOSEPH  
STREET ADDRESS 1118 BESWMER ROAD  
CITY-ST-ZIP HUNTSVILLE AL

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

*Caleb White Jr. - President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-04

Date

904-743-2758

Daytime Phone #