## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 762120** 

Entity Name: ANCIENT CITY ROAD RUNNERS, INC.

**Current Principal Place of Business:** 

1700 LAKESIDE AVE

SAINT AUGUSTINE. FL 32084

**Current Mailing Address:** 

P.O. BOX 4111

SAINT AUGUSTINE. FL 32085 US

FEI Number: 59-2284115 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYLE, DAVID F 1700 LAKESIDE AVE

SAINT AUGUSTINE, FL 32084 US

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: DAVID F. BOYLE 03/19/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

**PRES** Title Title VΡ

MICHIE, AMY J Name TAYLOR, JUSTIN Name

83 COMARES AVE Address 282 N TWIN MAPLE RD Address

**UNIT 9A** 

SAINT AUGUSTINE FL 32080

City-State-Zip: SAINT AUGUSTINE FL 32084 City-State-Zip: SAINT AUGUSTINE FL 32080

Title **SECRETARY** Title **TREASURER** Name BOYLE, DAVID F

Name LEE, TRACY VANN Address 1700 LAKESIDE AVE

4250 A1A S Address

SAINT AUGUSTINE FL 32084 City-State-Zip: #B31

I hereby 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 all other like empowered.

03/19/2015 SIGNATURE: DAVID F BOYLE **SECRETARY** 

**FILED** Mar 19, 2015

**Secretary of State** 

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