

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000278

Entity Name: USA UNLIMITED INC**Current Principal Place of Business:**3218 LENOX AVENUE
JACKSONVILLE, FL 32254**Current Mailing Address:**P.O. BOX 37211
JACKSONVILLE, FL 32236 US**FEI Number:** 00-0000278**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JERIDO, CAMIKA S
3218 LENOX AVENUE
JACKSONVILLE, FL 32254 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	JERIDO, CAMIKA S
Address	3344 HUNT STREET
City-State-Zip:	JACKSONVILLE FL 32254

Title	VP
Name	KEETON, CARINA L
Address	3344 HUNT STREET
City-State-Zip:	JACKSONVILLE FL 32254

Title	DIR
Name	PORTER, ANTHONY J
Address	3344 HUNT STREET
City-State-Zip:	JACKSONVILLE FL 32254

Title	SEC
Name	PORTER, TONYA E
Address	3344 HUNT STREET
City-State-Zip:	JACKSONVILLE FL 32254

Title	TRES
Name	JERIDO, SHANTELL L
Address	3344 HUNT STREET
City-State-Zip:	JACKSONVILLE FL 32254

Title	BOARD OF DIRECTOR
Name	MANNING, CORDELL T
Address	3344 HUNT STREET
City-State-Zip:	JACKSONVILLE FL 32254

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.

SIGNATURE: CAMIKA S JERIDO**PRESIDENT****03/18/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date