DOCUMENT# N1600005371 Entity Name: THE AFRICAN-AMERICAN COACHES, GAME OFFICIALS AND

2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

ATHLETIC ASSOCIATION, INC.

#### **Current Principal Place of Business:**

3451 JESSICA MEL LANE JACKSONVILLE, FL 32218

REPORT

# **Current Mailing Address:**

3451 JESSSICA MEL LANE JACKSONVILLE, FL 32218 US

SIGNATURE: MICHAEL JACKSON

# FEI Number: 81-3189320

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

JACKSON, MICHAEL 871 YELLOW WATER ROAD JACKSONVILLE, FL 32234 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.

|                           | Electronic Signature of Registered Agent    |                 |                          | Date |
|---------------------------|---|-----------------|--------------------------|------|
| Officer/Director Detail : |   |                 |                          |      |
| Title                     | PRESIDENT                                   | Title           | VP                       |      |
| Name                      | WHITE, MARVIN                               | Name            | FARLEY, NATHANIEL        |      |
| Address                   | 3395 CLYDE DRIVE                            | Address         | 6714 CORDAY COURT        |      |
| City-State-Zip:           | JACKSONVILLE FL 32208                       | City-State-Zip: | JACKSONVILLE FL 32208    |      |
| Title                     | TREASURER                                   | Title           | SECRETARY                |      |
| Name                      | SIMMONS, JACKIE                             | Name            | THOMAS, DAVID            |      |
| Address                   | 871 YELLOW WATER ROAD                       | Address         | 3938 MUIRFIELD BLVD EAST |      |
| City-State-Zip:           | JACKSONVILLE FL 32234                       | City-State-Zip: | JACKSONVILLE FL 32225    |      |
| Title                     | PARLIAMENTARIAN                             | Title           | SARGENT OF ARMS          |      |
| Name                      | PIERCE, HAROLD                              | Name            | WHEELER, JEROME          |      |
| Address                   | 6720 CASPER CIRCLE E.                       | Address         | 8258 CONCORD BLVD. W.    |      |
| City-State-Zip:           | JACKSONVILLE FL 32219                       | City-State-Zip: | JACKSONVILLE FL 32208    |      |
| Title<br>Name             | CORRESPONDING SECRETARY<br>JACKSON, MICHAEL |                 |                          |      |
| Address                   | 3451 JESSSICA MEL LANE                      |                 |                          |      |

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: MICHAEL JACKSON

City-State-Zip: JACKSONVILLE FL 32218

#### CORRESPONDENCE SECRETARY

11/17/2022

Date

Nov 17, 2022 Secretary of State 7414001789CC

Certificate of Status Desired: No

FILED

11/17/2022

Date