

**2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N16000005371

**Entity Name:** THE AFRICAN-AMERICAN COACHES, GAME OFFICIALS AND ATHLETIC ASSOCIATION, INC.

**FILED**  
**Aug 11, 2021**  
**Secretary of State**  
**5528308324CR**

**Current Principal Place of Business:**

5426 SOUTEL DRIVE  
JACKSONVILLE, FL 32219

**Current Mailing Address:**

P.O. BOX 331  
BALDWIN, FL 32234 US

**FEI Number: 81-3189320**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SIMMONS, JACKIE  
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.*

SIGNATURE: JACKIE SIMMONS

08/11/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DANIEL, MATHIS  
Address        5426 SOUTEL DRIVE  
City-State-Zip: JACKSONVILLE FL 32219

Title            VP  
Name            WHEELER, JEROME  
Address        5426 SOUTEL DRIVE  
City-State-Zip: JACKSONVILLE FL 32219

Title            TREASURER  
Name            SIMMONS, JACKIE  
Address        5426 SOUTEL DRIVE  
City-State-Zip: JACKSONVILLE FL 32219

Title            SECRETARY  
Name            THOMAS, DAVID  
Address        5426 SOUTEL DRIVE  
City-State-Zip: JACKSONVILLE FL 32219

Title            CORRESPONDING SECRETARY  
Name            DAY, JAMES  
Address        5426 SOUTEL DRIVE  
City-State-Zip: JACKSONVILLE FL 32219

*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: JACKIE SIMMONS

TREASURER

08/11/2021

Electronic Signature of Signing Officer/Director Detail

Date