

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 17, 2003 8:00 am**  
**Secretary of State**

01-17-2003 90040 018 \*\*\*\*61.25

**DOCUMENT # 704327**

1. Entity Name

**BOYS' AND GIRLS' CLUBS OF NORTHEAST FLORIDA, INC**



Principal Place of Business

**1300 RIVERPLACE BLVD.  
STE 310  
JACKSONVILLE FL 32207  
US**

Mailing Address

**1300 RIVERPLACE BLVD.  
STE 310  
JACKSONVILLE FL 32207  
US**

**70011482**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

**1300 Riverplace Blvd.**

Suite, Apt. #, etc.  
**Ste. 310**

3. Mailing Address

**1300 Riverplace Blvd.**

Suite, Apt. #, etc.  
**Ste. 310**

City & State

**Jacksonville, Fl.**

City & State

**Jacksonville, Fl.**

Zip  
**32207**

Country  
**US**

Zip  
**32207**

Country  
**US**

4. FEI Number **59-6167630**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HACKETT, MICHAEL J** Deborah J. Verges  
**1300 RIVERPLACE BLVD STE 310  
JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name **Deborah J. Verges**  
Street Address (P.O. Box Number is Not Acceptable)  
**1300 Riverplace Blvd.**  
**Ste. 310**  
City **Jacksonville, FL** Zip Code  
**32207**

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

*Deborah J. Verges*

Deborah J. Verges

*1/8/03*

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**

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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>ED<br/>HACKETT, MICHAEL J</b> <input type="checkbox"/> Delete<br><b>1300 RIVERPLACE BLVD STE310<br/>JACKSONVILLE FL 32207</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Deborah J. Verges</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>1300 Riverplace Blvd., Ste. 310<br/>Jacksonville, Fl 32207<br/>Executive Director</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>HOWARD, JOHN</b> <input type="checkbox"/> Delete<br><b>4655 SALISBURY RD., SUITE 300<br/>JACKSONVILLE FL 32256</b>      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>James C. Johns</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>9700 Philips Hwy., Ste. 102<br/>Jacksonville, Fl. 32256<br/>Board President</b>          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>CASEY, LOU</b> <input type="checkbox"/> Delete<br><b>P.O. BOX 10129<br/>JACKSONVILLE FL 32247-0129</b>                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Karen Kelley</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>9428 Baymeadows Road, Ste. 500<br/>Jacksonville, Fl 32256<br/>Board Vice President</b>     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                 |

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:

*Deborah J. Verges*

Deborah J. Verges

*1/8/03*

904-396-4435

CR2E037 (10/02)