

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 722903

1. Entity Name
FLORIDA FIRST COAST AMATEUR SOFTBALL
ASSOCIATION METRO JACKSONVILLE ATHLETIC
ASSOCIATION, INC.



Principal Place of Business
10555 SERENA DR
JACKSONVILLE, FL 32225 US

Mailing Address
10555 SERENA DR
JACKSONVILLE, FL 32225 US

FILED

06 SEP 18 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09072006 Chg-NP CR2E037 (4/06)

City & State

City & State

4. FEI Number
59-2278619

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

USSERY, TOMMY L
8021 BOONESBOROUGH TRAIL
JACKSONVILLE, FL 32244

7. Name and Address of New Registered Agent

Name Lora Radiches
Street Address (P.O. Box Number is Not Acceptable)
10555 Serena Dr
City Jacksonville FL Zip Code 32225

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 Lora Radiches, ST

9/13/2006

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR 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

TITLE P
NAME USSERY, TOMMY L
STREET ADDRESS 8021 BOONESBOROUGH TRAIL
CITY-ST-ZIP JACKSONVILLE, FL 32244 ☒ Delete

TITLE VP
NAME KNIGHT, JAMES E II
STREET ADDRESS 1552 BONAVENTURE AVE
CITY-ST-ZIP JACKSONVILLE, FL 32244 ☒ Delete

TITLE ST
NAME RADICHES, LORA
STREET ADDRESS 10555 SERENA DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32225 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME Larry L Krystalude
STREET ADDRESS 760 Blackhawk Lake LA
CITY-ST-ZIP St. Augustine, Fla 32084 ☐ Change ☒ Addition

TITLE VP
NAME John Radiches
STREET ADDRESS 10555 Serena Dr
CITY-ST-ZIP Jax Fla 32225 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Lora Radiches, Lora Radiches 9/13/06 904-645-5077

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #