FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -3 PM 1:32

DOCUMENT # 729363 (2)

1. Corporation Name

RONDETTE ATHLETIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7967 FORT CAROLINE ROAD PO BOX 11645 JACKSONVILLE FL 32211	7967 FORT CAROLINE ROAD PO BOX 11645 JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/16/1974
3a. Date of Last Report: 04/08/1994
4. FEI Number: 59-2954781 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

HRITZ, ROBERT A
3120 HAMPSTEAD DR
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent

81 Name: Kerlin Heather F
82 Street Address (P.O. Box Number is Not Acceptable): 2212 Broad Water Crt
83
84 City: Jacksonville FL 85 Zip Code: 32225

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☑ Change ☐ Addition
NAME	HRITZ, ROBERT A	1.2 NAME	Kerlin Heather F	
STREET ADDRESS	3120 HAMPSTEAD DR	1.3 STREET ADDRESS	2212 Broad Water Crt	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	Jax Fl 32225	
TITLE	VD	2.1 TITLE		☐ Change ☐ Addition
NAME	ANDREWS, BRUCE	2.2 NAME		
STREET ADDRESS	12637 MUIRFIELD BLVD. N	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32225	2.4 CITY-ST-ZIP		
TITLE	VD	3.1 TITLE	VP	☑ Change ☐ Addition
NAME	CROSBY, RICHARD	3.2 NAME	Carter Beverly	
STREET ADDRESS	1580 OAK RIDGE DR. W.	3.3 STREET ADDRESS	12565 Twilight Lane	
CITY-ST-ZIP	JACKSONVILLE FL 32225	3.4 CITY-ST-ZIP	Jax Fl 32225	
TITLE	TD	4.1 TITLE	TD	☑ Change ☐ Addition
NAME	KERLIN, HEATHER	4.2 NAME	Kandy Franklin	
STREET ADDRESS	2212 BROAD WATER CT	4.3 STREET ADDRESS	2206 St. Martins Dr. E.	
CITY-ST-ZIP	JACKSONVILLE, FL 00000	4.4 CITY-ST-ZIP	Jax Fl 32246	
TITLE	SD	5.1 TITLE		☐ Change ☐ Addition
NAME	SINGLEY, SUSAN	5.2 NAME		
STREET ADDRESS	8518 INDIAN AVENUE	5.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32211	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Heather F Kerlin 1-23-95 904 363 6339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0020322