

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90241 002 ****61.25

DOCUMENT # 740934

1. Corporation Name

FIRST COAST SOCCER ASSOCIATION, INC.

537834 - 90241 - 2

Principal Place of Business

1301 RIVERPLACE BLVD.
SUITE 1609
JACKSONVILLE FL 32207
US

Mailing Address

1301 RIVERPLACE BLVD.
SUITE 1609
JACKSONVILLE FL 32207
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30

3. Date Incorporated or Qualified

12/02/1977

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

PEEK, EUGENE G. III
1301 RIVERPLACE BLVD.
SUITE 1609
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	BRADDOCK	
STREET ADDRESS	607 N 3RD ST	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	CEA, JEFF	
STREET ADDRESS	1073 WINDDRIFT LANE	
CITY-ST-ZIP	ATLANTIC BEACH FL 32233	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BELL, BILL	
STREET ADDRESS	2331 SEMINOLE ROAD	
CITY-ST-ZIP	ATLANTIC BEACH FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	HEFLIN, ROGER	
STREET ADDRESS	62 EVANS DR	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	WHISNANT, SANDY	
STREET ADDRESS	1208 14TH ST N	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DALEY, JOHN	
STREET ADDRESS	1009 N 10TH ST	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Levine, Mike	
1.3 STREET ADDRESS	1665 Selva Marina	
1.4 CITY-ST-ZIP	Atlantic Beach, FL 32233	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	1073 Windrift Lane	
2.4 CITY-ST-ZIP	Atlantic Beach, FL 32233	
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	56 Marsh Drive	
3.4 CITY-ST-ZIP	Jacksonville Beach, FL 32250	
4.1 TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Rehberg, Russell	
4.3 STREET ADDRESS	3500 N. University Blvd., #70	
4.4 CITY-ST-ZIP	Jacksonville, Florida 32217	
5.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Shagena, Charles	
5.3 STREET ADDRESS	1413 Constitution Court	
5.4 CITY-ST-ZIP	Jacksonville Beach, FL 32250	
6.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Edenfield, Karen	
6.3 STREET ADDRESS	619 Oleander Court	
6.4 CITY-ST-ZIP	Neptune Beach, FL 32266	

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/24/99

904/399-1609

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

FIRST COAST SOCCER ASSOCIATION, INC.
EXHIBIT "A"

537834-9024-2
740934

Please add the following additional directors of the above-captioned corporation:

Director
Bryan, Molly
1324 Morning Sun Drive
Jacksonville Beach, FL 32225

Director
Bernreuter, Chuck
302 Third Street, Suite J
Neptune Beach, FL 32266

Director
Kirk, Ricke
Box 2612
Ponte Vedra Beach, FL 32004

Director
Downing, Tony
2323 Oceanwalk Drive West
Atlantic Beach, FL 32233

Director
Hofman, Sue
3730 Pinckney Island Court
Jacksonville, FL 32224

Director
Halpin, Brad
421 Pablo Point Drive
Jacksonville, FL 32225

Director
Redding, Gina
120 Hidden Cove Lane
Ponte Vedra Beach, FL 32082

Director
Travis, Tina
2160 Mayport Road, #2206
Atlantic Beach, FL 32233

Director
Hosea, Katrina
3898 Biggin Church Road
Jacksonville, FL 32224

Director
Levine, Barbara
1665 Selva Marina
Atlantic Beach, FL 32233

Director
Lindley, David
432 S. Lakewood Run Drive
Ponte Vedra Beach, FL 32082