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

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FILED
Apr 11, 2003 8:00 am
Secretary of State
03-20-2003 90164 036 ****61.25

DOCUMENT # 740934

1. Entity Name
FIRST COAST SOCCER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
PO BOX 50969 JACKSONVILLE FL 32240 US	PO BOX 50969 JACKSONVILLE FL 32240 US

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
2850 HODGES BLVD.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: JACKSONVILL, FL	City & State
Zip: 32224 Country: U.S.A.	Zip Country

4. FEI Number 59-2881219 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AHMED, MICHAEL 453 PAPAYA COURT JACKSONVILLE FL 32225	Name: CARLOS CAMPOS Street Address (P.O. Box Number is Not Acceptable): 14210 WAVERLY FALLS LANE E. City: JACKSONVILLE FL Zip Code: 32224

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TD EDENFIELD, KAREN 619 OLEANDER CT NEPTUNE BEACH FL 32266	☑ Delete	PD CARLOS CAMPOS 14210 Waverly Falls Ln. E. JACKSONVILLE FL 32224	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD NEWTON, CLAY 15 ARBOR CLUB DR 105 PONTE VEDRA BEACH FL 32082	☑ Delete	VPD MARIO ROBIO 8995 BENSALEM DR. JACKSONVILLE FL 32257	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD AHMED, MICHAEL 453 PAPAYA COURT JACKSONVILLE FL 32225	☑ Delete	TD MARY BETH JOHNS 2440 San Sago Ln Jacksonville, FL 32216	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MALEWICKI, CHRIS 2273 WINDJAMMER LANE EAST JACKSONVILLE FL 32224	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	BRAD HALPIN Director 421 PABLO POINT DRIVE JACKSONVILLE FL 32225	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	G. WESLEY AVRITT, Director 2655 SUPREME CT. JACKSONVILLE FL 32246	☐ Change ☑ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #