

2000 UNIFORM BUSINESS REPORT (UBR)

5/1/0

FILED

Jun 01, 2000 8:00 am
Secretary of State

05-01-2000 90390 046 ****61.25

DOCUMENT # 751090

1. Entity Name

CLAY COUNTY SOCCER CLUB, INC.

Principal Place of Business

Mailing Address

PO BOX 2670
ORANGE PARK FL 32067-2670

P.O. BOX 2670
ORANGE PARK FL 32067-2670

2. Principal Place of Business

4387 Lakeshore Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orange Park, FL

City & State

Zip

32073

Country

US

Zip

Country

4. FEI Number

59-1981194

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

Name

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

City

FL

Zip Code

DAVE, JAMES H.
2821 BOLTAN SUITE A
ORANGE PARK FL 32073

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	TO	☒ Delete
NAME	COCCIOLO, BARBARA	
STREET ADDRESS	5519 BRADFORD COURT	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	VD	☒ Delete
NAME	MARTORANA, CARMELO	
STREET ADDRESS	969 SANDSTONE DR	
CITY-ST-ZIP	ORANGE PARK FL 32065	
TITLE	VD	☒ Delete
NAME	SHRINER, CRAIG	
STREET ADDRESS	2870 CARTER BRARTON RD	
CITY-ST-ZIP	ORANGE PARK FL 32065	
TITLE	SD	☒ Delete
NAME	GROSS, JANE	
STREET ADDRESS	2686 FOXWOOD ROAD S	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	PD	☐ Delete
NAME	GULLAGHER, WILLIAM	
STREET ADDRESS	108 SATURN	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	VD	☒ Delete
NAME	BELK, SANDRA	
STREET ADDRESS	12515 EAST CR 215	
CITY-ST-ZIP	WALDO FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	☐ Change ☒ Addition
STREET ADDRESS	1604 Rustling Drive	
CITY-ST-ZIP	Orange Park, FL 32073	
TITLE	VD	☐ Change ☒ Addition
NAME	Brooke Caplin	
STREET ADDRESS	2785 East Holly Point Rd.	
CITY-ST-ZIP	Orange Park, FL 32073	
TITLE	VD	☐ Change ☒ Addition
NAME	Randolph Wells	
STREET ADDRESS	2846 Circle Ridge Dr	
CITY-ST-ZIP	Orange Park, FL 32065	
TITLE	U.P. Recreational Div	☐ Change ☒ Addition
NAME	George M. Francisco	
STREET ADDRESS	2010 Washington Street	
CITY-ST-ZIP	Orange Park, FL 32073	
TITLE	CHAIRMAN CSC	☐ Change ☒ Addition
NAME	Jim Cannon	
STREET ADDRESS	2553 Huntington Way	
CITY-ST-ZIP	Orange Park, FL 32073	
TITLE	VD	☐ Change ☒ Addition
NAME	Kimberly Thurman	
STREET ADDRESS	9138 Honeysuckle Circle	
CITY-ST-ZIP	Middleburg, FL 32068-5665	

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]* DATE: *4-23-00* (904) 288-2474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2007 (9/99)