

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2001 8:00 am
Secretary of State

08-14-2001 90012 006 ****70.00

DOCUMENT # 000000003176

1. Entity Name
The New Lackawanna Athletic Association, Inc.

Principal Place of Business Mailing Address

2998 Edison Ave.
Jacksonville, Fl. 32254

2. Principal Place of Business Suite, Apt. #, etc.
Same as above

3. Mailing Address Suite, Apt. #, etc.
Same as above

City & State City & State

Zip Country Zip Country
Duval Duval

4. FEI Number
59-364-9437

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

DO NOT WRITE IN THIS SPACE

00061285

6. Name and Address of Current Registered Agent

Meltonia Donley
2998 Edison Ave.
Jacksonville, Fl. 32254

7. Name and Address of New Registered Agent

Name Same

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

City FL Zip Code

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 Meltonia Donley (NOTE: Registered Agent signature required when reinstating)

DATE 8-6-01

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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 NAME STREET ADDRESS CITY-ST-ZIP	<u>LeShun HighSmith President</u> <u>1030 W. 30th St.</u> <u>JAX, Fla 32209</u>	<input checked="" type="checkbox"/> Delete
TITLE <u>TD</u> NAME STREET ADDRESS CITY-ST-ZIP	<u>VICE President</u> <u>Juanita Dixon</u> <u>5336 Quan Dr</u> <u>JAX, Fla 32205</u>	<input type="checkbox"/> Delete
TITLE <u>TD</u> NAME STREET ADDRESS CITY-ST-ZIP	<u>SECRETARY</u> <u>Meltonia Donley</u> <u>7628 3rd DE W</u> <u>JAX, Fla 32219</u>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Treasurer</u> <u>Craig A. Rawls</u> <u>6011 Carnation Rd.</u> <u>Jax., Fl. 32209</u>	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Meltonia Donley 8-6-01 (904) 384-9119

CR2E037 (5/01)