

FILED  
May 05, 2003 8:00 am  
Secretary of State

05-05-2003 90165 015 \*\*\*\*70.00

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

DOCUMENT # N01000001020

1. Entity Name  
**THE CENTER FOR STRATEGIC GOVERNANCE AND  
INTERNATIONAL INITIATIVES, INC.**



Principal Place of Business  
C/O FLORIDA COASTAL LAW SCHOOL  
7555 BEACH BLVD.  
JACKSONVILLE, FL 32216

Mailing Address  
C/O FLORIDA COASTAL LAW SCHOOL  
7555 BEACH BLVD.  
JACKSONVILLE, FL 32216

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3697955

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

SMITH, ERIC  
C/O FLORIDA COASTAL LAW SCHOOL  
7555 BEACH BLVD.  
JACKSONVILLE, FL 32216

7. Name and Address of New Registered Agent

Name

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating.)

DATE

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

TITLE D ☐ Delete  
NAME CATALAND, JAMES  
STREET ADDRESS 755 BEACH BLVD.  
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE D ☐ Delete  
NAME LIVELY, DONALD  
STREET ADDRESS 755 BEACH BLVD.  
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE D ☐ Delete  
NAME SMITH, ERIC  
STREET ADDRESS 755 BEACH BLVD.  
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric Smith Dir

4/30/03 (904) 680-7700

Date

Daytime Phone #

CR2E037 (10/02)