

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90023 046 ****61.25

DOCUMENT # N04000005168

1. Entity Name

FIRST COAST ASIAN AMERICAN CHAMBER OF
COMMERCE, INC.



Principal Place of Business

9951 ATLANTIC BLVD., STE. 469
JACKSONVILLE FL 32225

Mailing Address

9951 ATLANTIC BLVD., STE. 469
JACKSONVILLE FL 32225

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number
55-0869523

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

ASSADOGLI, MARY G
9951 ATLANTIC BLVD., STE. 469
JACKSONVILLE FL 32225

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 signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ASSADOGLI, MARY G
9951 ATLANTIC BLVD., STE. 469
JACKSONVILLE FL 32225 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
LEE, JAY
9951 ATLANTIC BLVD #469
JAX FL 32225 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BONTILAO, BOB
9951 ATLANTIC BLVD., STE. 469
JACKSONVILLE FL 32225 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
KUMAR, FALGUNI
9951 ATLANTIC BLVD., STE. 469
JACKSONVILLE FL 32225 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Kumar Falguni
9951 Atlantic Blvd. Ste #469
Jacksonville, FL 32225 ☒ Change ☐ Addition

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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] Falguni Kumar