

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007638

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: FIRST COAST USBC ASSOCIATION, INC.

## Current Principal Place of Business:

13440 GALLANT FOX CIRCLE WEST  
JACKSONVILLE, FL 32218

## New Principal Place of Business:

13100 BROXTON BAY DR  
APT 204  
JACKSONVILLE, FL 32218

## Current Mailing Address:

PO BOX 26345  
JACKSONVILLE, FL 32226

## New Mailing Address:

FEI Number: 20-3044473      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KATTMAN, JOHN F  
4069 ATLANTIC BLVD  
JACKSONVILLE, FL 32207      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FRANK, MARY  
Address: 8930 CHISWICK CT  
City-St-Zip: JACKSONVILLE, FL 322575207

Title: 1STV ( ) Delete  
Name: LIMER, ROGER  
Address: 13440 GALLON FOX CIR W  
City-St-Zip: JACKSONVILLE, FL 32218

Title: 2NDV ( ) Delete  
Name: DAVENPORT, JERRY  
Address: 1321 SAN MATEO AVE  
City-St-Zip: JACKSONVILLE, FL 322078841

Title: 3RDV ( ) Delete  
Name: WILLIS, DEBRA  
Address: 802 PORT WINE LN  
City-St-Zip: JACKSONVILLE, FL 32225

Title: SGTA ( ) Delete  
Name: SWANSON, TOM  
Address: 9838 OLD BAYBEADOWS RD #249  
City-St-Zip: JACKSONVILLE, FL 322568101

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LIMER, ROGER  
Address: 13100 BROXTON BAY DR #204  
City-St-Zip: JACKSONVILLE, FL 32218

Title: 1STV (X) Change ( ) Addition  
Name: DELCAMBRE, RONALD  
Address: PO BOX 7893  
City-St-Zip: JACKSONVILLE, FL 32238

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SGTA (X) Change ( ) Addition  
Name: SWANSON, TOM  
Address: 11737 WATTLE TREE RD N  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER W. LIMER

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date