

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011322

FILED  
Feb 12, 2010  
Secretary of State

**Entity Name:** FIRST COAST LIONS CHARITABLE TRUST OF FIRST COAST OF FLORIDA, INC.

**Current Principal Place of Business:**

7642 KINGSTREE DR. SO.  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

7642 KINGSTREE DR. SO.  
JACKSONVILLE, FL 32211 US

**Current Mailing Address:**

7642 KINGSTREE DR. SO.  
JACKSONVILLE, FL 32211

**New Mailing Address:**

7642 KINGSTREE DR. SO.  
JACKSONVILLE, FL 32211 US

**FEI Number:** 04-3826791

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRZOZOWSKI, TERESA  
7642 KINGSTREE DR. SO.  
JACKSONVILLE, FL 32211 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  
Name: MEARES, WILLIAM R  
Address: 6412 PUTNAM ST  
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

Title: VP  
Name: BRADFORD, DENNIS  
Address: 2012 HOVINGTON CIR WEST  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: S  
Name: WAGNER, HARRY  
Address: 13659 DUNN CREEK R.D  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: T  
Name: BRZOZOWSKI, TERESA  
Address: 7642 KINGSTREE DR. SO.  
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: T  
Name: STUART, JOHN R  
Address: 10253 BRIARCLIFF RD EAST  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: T  
Name: KNOFF, EDWARD L JR  
Address: 5232 SHARON TER  
City-St-Zip: JACKSONVILLE, FL 32207 US

I hereby 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 all other like empowered.

SIGNATURE: TERESA BRZOZOWSKI

T

02/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date