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

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90095 003 ****61.25

DOCUMENT # N05967

1. Entity Name
MANDARIN BUSINESS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3130 Hartley Road	11111-70 San JoseBlvd, PMB 314
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville FL	City & State: Jacksonville FL
Zip: 32257 Country:	Zip: 32223 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-2478844 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Michael Bowlus

Street Address (P.O. Box Number is Not Acceptable)
10110 San JoseBlvd

City: Jacksonville FL Zip Code: 32257

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

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	PD Alan Huerth 6622 Southpoint Dr S,Ste 495 Jacksonville FL 32256
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Jamie Glavich 9664 Hood Road Jacksonville FL 32257
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Steve Peretzman 8834 Goodby's Executive Dr,Ste 4 Jacksonville FL 32217
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Jim Taylor 10039 Elmbrook Circle Jacksonville FL 32257
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Frank Wallmeyer 4371 Gasden Court Jacksonville FL 32207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Sylvia Squier 11148-4 San Jose Blvd Jacksonville FL 32223

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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jim Taylor Jim Taylor 4/19, 2002 904/880-2743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR