

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

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90093 016 ****61.25

DOCUMENT # N09937

1. Entity Name

GREATER JACKSONVILLE COIN CLUB, INC.



Principal Place of Business
PO BOX 48322
JACKSONVILLE FL 32247
US

Mailing Address
PO BOX 48322
JACKSONVILLE FL 32247
US



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

59-2744533

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

RODRIGUEZ, BILL
4769 GODWIN AVE.
JACKSONVILLE FL 32210

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 ☐ Delete
NAME D
STREET ADDRESS WELLS, RAY
CITY-ST-ZIP MOSS POINTE TRAIL EAST
JACKSONVILLE FL 32244

TITLE ☒ Delete
NAME S
STREET ADDRESS LAMPHEAR, ROBERT
CITY-ST-ZIP 501 VIKING LANE
ATLANTIC BEACH FL 32233

TITLE ☐ Delete
NAME P
STREET ADDRESS LEVAN, ROBERT
CITY-ST-ZIP 865 SOUTH SHORE RD
JACKSONVILLE FL

TITLE ☐ Delete
NAME D
STREET ADDRESS LACOMB, PETER
CITY-ST-ZIP 3009 WALTON ST., #4
JACKSONVILLE FL

TITLE ☐ Delete
NAME T
STREET ADDRESS RODRIGUEZ, BILL
CITY-ST-ZIP P.O. BOX 7112
ORANGE PARK FL 32073

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 SECRETARY
STREET ADDRESS STEVEN COHN
CITY-ST-ZIP 1546 GEMINI COURT
ORANGE PARK FL 32073
DIRECTOR

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

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

TITLE ☐ Change ☒ Addition
NAME PRESIDENT
STREET ADDRESS THOMAS H. BOBBITT
CITY-ST-ZIP 4069 MARIAHNA ROAD
JACKSONVILLE, FL 32217

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

1/24/06 904-772-1608