


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Sep 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N14253** (1)
1. Corporation Name
WESTSIDE ATHLETIC ASSOCIATION INCORPORATED



Principal Place of Business	Mailing Address
6045 105TH ST. JACKSONVILLE FL 32244 US	6121 COLLINS RD. LOT 14 JACKSONVILLE FL 32244 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/08/1986		3a. Date of Last Report 01/24/1996	
21		26		4. FEI Number 10-0332900		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24 Zip		25 Country		29 Zip		30 Country	
24		25		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

EBREO, RICHARD J. J
6121 COLLINS RD.
LOT 14
JACKSONVILLE FL 32244

81 Name	FREY, CHARLES H. JR.
82 Street Address (P.O. Box Number is Not Acceptable)	8144 COLONNADE CT. W.
83	
84 City	JACKSONVILLE
85 FL	32244

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Charles H. Frey, Jr. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EBREO, RICHARD J. JR.			1.2 NAME	FREY, CHARLES H. JR.		
STREET ADDRESS	6121 COLLINS RD., LOT 14			1.3 STREET ADDRESS	8144 COLONNADE CT. W.		
CITY-ST-ZIP	JACKSONVILLE FL			1.4 CITY-ST-ZIP	JACKSONVILLE, FL 32244		
TITLE	DT	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RAPOZA, KELLY			2.2 NAME			
STREET ADDRESS	5880 OAKLANE DR.			2.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			2.4 CITY-ST-ZIP			
TITLE	DS	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	DS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SHERRY MANOR			3.2 NAME	TIPPING, PEGGY		
STREET ADDRESS	5880 ALLSPICE CIRCLE WEST			3.3 STREET ADDRESS	5554 118th ST		
CITY-ST-ZIP	JACKSONVILLE FL			3.4 CITY-ST-ZIP	JACKSONVILLE, FL 32244		
TITLE	DV	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	DV	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRICKLE, DONALD			4.2 NAME	MANOR, SHERRY		
STREET ADDRESS	5912 NAUGHTON LANE			4.3 STREET ADDRESS	7839 ALLSPICE CIR. W.		
CITY-ST-ZIP	JACKSONVILLE FL			4.4 CITY-ST-ZIP	JACKSONVILLE, FL 32244		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Richard J. J. Ebreo 9-1-97 (904) 771-7100

CR2E037 (4/97)