


FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90003 020 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N39216

1. Corporation Name

FILIPINO-AMERICAN CLUB OF JACKSONVILLE, INC.

Principal Place of Business

 13126 ANNANDALE DRIVE S.
 JACKSONVILLE FL 32225
 US

Mailing Address

 13126 ANNANDALE DRIVE S.
 JACKSONVILLE FL 32225
 US


2. Principal Place of Business 21 N/A	2a. Mailing Address 26 N/A	3. Date Incorporated or Qualified 07/20/1990
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 59-2893462
22	27	Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23	28	6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees
Zip Country	Zip Country	Trust Fund Contribution
24	25	29
30		

9. Name and Address of Current Registered Agent

BARATA, RAYMOND B.
13126 ANNANDALE DRIVE S.
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

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

Raymond Barata - President
 Signature/Typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/25/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DT	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BARATA, RAYMOND B.		1.2 NAME	
STREET ADDRESS 13126 ANNANDALE DRIVE S.		1.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 32225		1.4 CITY-ST-ZIP	
TITLE DT	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CARAGIAN, REYNALDO		2.2 NAME	
STREET ADDRESS 2761 COLONIES DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL		2.4 CITY-ST-ZIP	
TITLE S	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BACANI, BETH		3.2 NAME	
STREET ADDRESS 1046 MAGNOLIA LANDING DRIVE		3.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL		3.4 CITY-ST-ZIP	
TITLE DT	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BANEZ, GLORIA		4.2 NAME	
STREET ADDRESS 4819 MADURO DRIVE		4.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 32216		4.4 CITY-ST-ZIP	
TITLE DT	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CARAGIAN, NORMA		5.2 NAME	
STREET ADDRESS 2761 COLONIES DRIVE		5.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 32250		5.4 CITY-ST-ZIP	
TITLE DT	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME VERDEFLOR, GENE		6.2 NAME	
STREET ADDRESS 13408 TERCEL STREET		6.3 STREET ADDRESS	
CITY-ST-ZIP JACKSONVILLE FL 32225		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: *Raymond Barata* **BARATA, RAYMOND, B.** **1/25/99** **904-221-3937**
 Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E037 (1/98)