

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 25, 2001 08:00 AM****Secretary of State****DOCUMENT # N44830**1. Entity Name
ST. JOHNS RIVER ATHLETIC ASSOCIATION, INC.Principal Place of Business
P O BOX 542
205 SKEET CLUB RD
PALATKA FL 32177
USMailing Address
P O BOX 542
205 SKEET CLUB RD
PALATKA FL 32177
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3130642

Applied For

Not Applicable

Zip Country

Zip Country

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

WRIGHT, RICARDO
205 SKEET CLUB RD

PALATKA FL 32177
USName
WRIGHT RICARDO M
Street Address (P.O. Box Number is Not Acceptable)
205 SKEET CLUB RD

City
PALATKA FL Zip Code
32177

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 **RICARDO M. WRIGHT****07/25/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME WELLS MARY KAYE
STREET ADDRESS 1825 ST JOHNS AVENUE
CITY-ST-ZIP PALATKA FL 32177TITLE SD ☒ Change ☐ Addition
NAME TROIANO SUSAN
STREET ADDRESS 1311 PROSPECT
CITY-ST-ZIP PALATKA FL 32177TITLE TD ☐ Delete
NAME LEWIS SHELLY
STREET ADDRESS PO BOX 542
CITY-ST-ZIP PALATKA FL 32178TITLE TD ☒ Change ☐ Addition
NAME WELLS MARY K
STREET ADDRESS 1825 ST JOHNS AVE
CITY-ST-ZIP PALATKA FL 32177TITLE D ☐ Delete
NAME TROIANO ROBERT W
STREET ADDRESS 1311 PROSPECT STREET
CITY-ST-ZIP PALATKA FL 32177TITLE D ☒ Change ☐ Addition
NAME TROIANO ROBERT W
STREET ADDRESS 1311 PROSPECT STREET
CITY-ST-ZIP PALATKA FL 32177TITLE SD ☐ Delete
NAME LEWIS SUSAN
STREET ADDRESS RT 1 BOX 5107
CITY-ST-ZIP PALATKA FL 32177TITLE VD ☒ Change ☐ Addition
NAME FELS RENO
STREET ADDRESS 110 N 11TH ST
CITY-ST-ZIP PALATKA FL 32177TITLE VD ☐ Delete
NAME FELS RENO
STREET ADDRESS 110 N 11TH ST
CITY-ST-ZIP PALATKA FL 32177TITLE PD ☒ Change ☐ Addition
NAME WRIGHT RICARDO M
STREET ADDRESS 205 SKEET CLUB ROAD
CITY-ST-ZIP PALATKA FL 32177TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **RICARDO M. WRIGHT**

P

07/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)