

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90992 036 ****61.25

DOCUMENT # N93000005279

1. Entity Name

VISAYAS-MINDANAO ASSOCIATION OF JACKSONVILLE INC



Principal Place of Business

**2021 KINGSLEY AVE
SUITE 102
ORANGE PARK FL 32013
US**

Mailing Address

**C/O LOURDES L DIAZ
5430 NANETTE CT
JACKSONVILLE FL 32244
US**

2. Principal Place of Business

7920 Amanda Crossing Dr. W

3. Mailing Address

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number **59-3238664**

Applied For

Not Applicable

Zip

32244

Country

Duval

Zip

32244

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CULBERTSON, BEBS

**8475 BUTTERCUP STREET
JACKSONVILLE FL 32210**

7. Name and Address of New Registered Agent

Name

Conrad Mangune

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

7920 Amanda Crossing Dr. W

City

Jacksonville

FL

Zip Code

32244

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

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

Conrad Mangune, President

April 28, 2003

DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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	DP	☒ Delete
NAME	CULBERTSON, BEBS.	
STREET ADDRESS	8475 BUTTERCUP STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	D	☒ Delete
NAME	AJOC, EDUARDO	
STREET ADDRESS	10896 BRIDGES ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32218	
TITLE	D	☐ Delete
NAME	DIAZ, LOURDES	
STREET ADDRESS	5430 NANETTE CT	
CITY-ST-ZIP	JACKSONVILLE FL 32244	
TITLE	D	☐ Delete
NAME	PAPEL, NESTOR	
STREET ADDRESS	10335 RIPPLE RUSH DRIVE W	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	D	☐ Delete
NAME	FLETCHER, HEIDI	
STREET ADDRESS	2285 CONSTITUTION DR	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	☒ Change ☐ Addition
NAME	Conrad Mangune	
STREET ADDRESS	7920 Amanda Crossing Dr. W	
CITY-ST-ZIP	Jacksonville, FL 32244	
TITLE	D	☒ Change ☐ Addition
NAME	Ajoc, Pacifico, Jr.	
STREET ADDRESS	11548 Kennedy Lane	
CITY-ST-ZIP	Jacksonville, FL 32217	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ 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)(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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Conrad Mangune
CONRAD MANGUNE, PRESIDENT (904) 777-4747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)