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NONPROFIT : CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

N94000001106 (3) DOCUMENT

JUNIOR ACHIEVEMENT OF FLORIDA'S FIRST COAST, INC.

FILED						
May 18 1998 8:00am						
Secretary of State						

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Principal Place of Business Mailing Address			T TEGRISO DIG TOSIL GLAN OBENT BOND DENN DENN DENN DENN DENN DENN DENN D			
2002 SOUTHSIDE BLVD JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 JACKSONVILLE FL 32216				3. Date Incorporated or Qualified 03/04/1994		
				4. FEI Number 59-1021800	Applied For Not Applicable	
2. Principal F 21 10245	2. Frincipal Place of Business 10245 Centurion Pkwy N. 2a. Mailing Address 26 Same as block 2			j o Certinicate di Status Desired	3.75 Additional Fee Regulred	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5.00 May Be dded to Fees	
City & State City & State 28				7. Is this nonprofit corporation a homeowners association? Yes No		
Zip 32256	32256 28 Duvál 29 30		Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Yes No		
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agen	<u>t</u>	
			81 Name	Dale L. Bateman		
GILFOYLE, DENNIS P 2002 SOUTHSIDE BLVD				el Address (P.O. Box Number is Not Acceptable) 245 Centurion Pkwy N.		
JAÇKSONVILLE FL 32216			[83] Q 13	teros		
•			94 (15)	ne.	Zin Code	
•			Ja Ja	cksonville FL 85	32256	
11. Pursuant	to the provisions of Sections 617.05	502 and 617.1508, Florida Statutes, the	e above-named	corporation submits this statement for the purpose of char	iging its registered	
agent. I a	registered agent, or both, in the Sta am familian with, and accept the obli	te of Florida. Such change was author igations of, Section 617,0503, Florida.	statutes.	oration's board of directors. I hereby accept the appointm	ent as registered	
SIGNATURE	Walch Batemen		ALE L	Bateman 1/8/98		
	Signature, typed or printed name of registered a	agent and title if applicable (NOTE: Regis	stered Ageni signature	required when reinstating) / DATE		
12.			<u>13. </u>	ADDITIONS/CHANGES TO OFFICERS AND DIR		
TITLE	P	DELETE 1.	I.1 TITLE	President P	Change Addition	
NAME	GILFOYLE, DENINIS P	1	.2 NAME	Dale L. Bateman	`	
STREET ADDRESS	2002 SOUTHSIDE BLVD	1	3 STREET ADDRESS	10245 Centurion Pkwy N Jacksonville, FL 32256		
CITY-ST-ZIP	JACKSONVILLE FL		.4 CITY-ST-ZIP			
TITLE	D	2	2.1 TITLE	Scorebory > X	Change X Addition	
NAME	POWELL, TED	2	2.2 NAME	Jack Johnson		
STREET ADDRESS	2002 SOUTHSIDE BLVD	2	2.3 Street Address	601 Riverside Avenue		
CITY-ST-ZIP	JACKSONVILLE FL		4 CITY-ST-ZIP	Jacksonville, FL 32204		
TITLE	D DOMEST		I.1 TITLE	Chairperson Elect >	Change Addition	
NAME	SHIELDS, ROBERT	J "	3.2 NAME	John Strom		
STREET ADORESS	2002 SOUTHSIDE BLVD		3 STREET ADDRESS	50 Laura Street, Suite 3000	!	
City-St-ZW	JACKSONVILLE FL		I.4. CITY-ST-ZIP	Jacksonville, FL 32202	Shange Addition	
TITLE	C NOODBOOK MANOY	- -	I.1 TITLE	·:	Shange	
NAME	MORRISON, NANCY		I. 2 NAME	Nancy Morrison		
STREET ADDRESS	2002 SOUTHSIDE BLVD		.3 STREET ADDRESS	4190 Belfort Road Ste. 475		
CITY-ST-ZIP	JACKSONVILLE FL		.4 CITY-ST-ZIP	Jacksonville, FL 32216	hanna Maddin	
TITLE	SD CONTRACTOR	_	.1 TITLE		Change Addition	
NAME	SCHULTZ, JOHN		.2 NAME	Tony Ong	•	
STREET ADDRESS	2002 SOUTHSIDE BLVD		3 STREET ADDRESS	50 North Laura St. 23rd Floo	r	
CITY-ST-ZIP	JACKSONVILLE FL		4 CITY-ST-ZIP	Jacksonville, FL 32202	hanna Addition	
THE		I ₹ 1161 6 18 ■ C		1.16		

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

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 changes, or on an attachment with an address.

904-645-7630