## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005599

Feb 11, 2005 Secretary of State

Entity Name: FORT CAROLINE ATHLETIC ASSOCIATION, INC.

LIS

**Current Principal Place of Business: New Principal Place of Business:** 

11751 MCCORMICK RD JACKSONVILLE, FL 32225

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 351135 JACKSONVILLE, FL 322351135 US

FEI Number: 59-3478332 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GERSON, JON 12560 POINT PARK DRIVE JACKSONVILLE, FL 32225 US

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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

JOHNSON, TERRY HOLBROOK, MIKE Name: Name: 4205 HARBOUR WOODS ROAD W. Address: 3973 HIGH PINE RD. Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32235

Title: () Delete Title: () Change () Addition

LOEROP, MICHELE Name: Name: Address: 5710 APPLEWOOD CT. Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip:

Title: () Delete Title: () Change () Addition

GERSON, JON Name: Name: 12560 POINT PARK DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip:

Title: AD/D ( ) Delete Title: SEC (X) Change ( ) Addition

NELMA, TODD Name: Name: WISELY, KELLY Address: 5215 RIVERTON ROAD Address: 4560 FULTON RD

City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32225

Title: () Delete Title: (X) Change ( ) Addition

PENDLETON, FRANK BOYD, DAVID Name: Name:

13844 HUNTERWOOD ROAD 2683 COBBLESTONE FOREST CIRCLE Address: Address:

City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JON GERSON Т 02/11/2005