

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003127

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** HENDRICKS AVENUE COMMUNITY ATHLETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

4001 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 5036  
JACKSONVILLE, FL 322475036 US

**New Mailing Address:**

**FEI Number:** 59-3556857

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRONQUIST, KARL L  
4001 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: YOST, JONATHAN PRESIDE  
Address: 4022 CONGA STREET  
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: D  
Name: MATTESON, JOHN R TREASUR  
Address: 915 OLD GROVE MANOR  
City-St-Zip: JACKSONVILLE, FL 32207 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN R. MATTESON

TREA

05/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date