

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jul 02 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000043984 (1)

1. Corporation Name  
RIVER CITY POOL LEAGUE, INC.

Principal Place of Business  
10732 GOLDEN SPIKE LANE  
JACKSONVILLE FL 32257  
US

Mailing Address  
P.O. BOX 56935  
JACKSONVILLE FL 32241  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/13/1994

4. FEI Number

59-3267539

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

D  
6114 GOODMAN RD.  
10732 GOLDEN SPIKE LANE  
JACKSONVILLE FL 32257

81 Name

ROBERT M. BIRD

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

10732 GOLDEN SPIKE LN.

83

84 City

JACKSONVILLE

FL

85 Zip Code

32257

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

5-20-98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME BIRD, ROBERT M  
STREET ADDRESS 6114 GOODMAN RD. SUITE 3  
CITY-ST-ZIP JACKSONVILLE FL 32244

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

P  
NAME BIRD, ROBERT M  
STREET ADDRESS 10732 GOLDEN SPIKE LN.  
CITY-ST-ZIP JACKSONVILLE FL 32257

2.1 TITLE ☐ Change ☒ Addition

V, T  
NAME BIRD, ROBERT L  
STREET ADDRESS 2652 SHANNON ST.  
CITY-ST-ZIP ORANGE PARK, FL. 32065

3.1 TITLE ☐ Change ☒ Addition

D, S  
NAME CARRA WATTS, CARRIE A.  
STREET ADDRESS 10732 GOLDEN SPIKE LN.  
CITY-ST-ZIP JACKSONVILLE, FL. 32257

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

*[Signature]*

5-20-98

9011 820-8202

CR2E034 (10/97)