FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 20 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N27209** **(8)**

1. Corporation Name

NAVY JACKSONVILLE YACHT CLUB, INC.

Principal Place of Business	Mailing Address
% COMMODORE P.O. BOX 29 JACKSONVILLE FL 32212	% COMMODORE P.O. BOX 29 JACKSONVILLE FL 32212

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/29/1988
3a. Date of Last Report: 03/14/1994
4. FEI Number: 59-2896605 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DANIELS, JOHN 6810 CANDLEWOOD DR. SOUTH JACKSONVILLE FL 32244	01 Name: RICHARD ARMSTRONG 02 Street Address (P.O. Box Number is Not Acceptable): 4055 PINTO ROAD 03: MIDDLEBURG, FL 32068 04 City: FL 05 Zip Code

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: Richard Armstrong 1-27-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	DANIELS, JOHN	1.2 NAME	RICHARD ARMSTRONG	
STREET ADDRESS	6810 CANDLEWOOD DR. SOUTH	1.3 STREET ADDRESS	4055 PINTO ROAD	
CITY-ST-ZIP	JAX FL	1.4 CITY-ST-ZIP	MIDDLEBURG	
TITLE	VD	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	ARMSTRONG, RICHARD	2.2 NAME	STEVEN EBERSOLE	
STREET ADDRESS	4055 PINTO RD.	2.3 STREET ADDRESS	311 WESTLEY ROAD	
CITY-ST-ZIP	MIDDLEBURG FL	2.4 CITY-ST-ZIP	GREEN COVE SPRINGS FL 32043	
TITLE	DS	3.1 TITLE	DS	☒ Change ☐ Addition
NAME	DE CROSTA, BETH	3.2 NAME	ANNE MULLINS	
STREET ADDRESS	1902 TEKESTA	3.3 STREET ADDRESS	615 CHARLES CARROL	
CITY-ST-ZIP	MIDDLEBURG FL	3.4 CITY-ST-ZIP	ORANGE PARK, FL 32073	
TITLE	DT	4.1 TITLE	DT	☒ Change ☐ Addition
NAME	TANIER, PAT	4.2 NAME	BETSY SHOULTS	
STREET ADDRESS	6803 LONDONBRIDGE LANE	4.3 STREET ADDRESS	689 SAN ROBAR DRIVE	
CITY-ST-ZIP	JAX FL	4.4 CITY-ST-ZIP	ORANGE PARK, FL 32073	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	TANIER, PAT	5.2 NAME	PAUL OVERTON	
STREET ADDRESS	2709 OAKDALE DR. WEST	5.3 STREET ADDRESS	5112 OAKSIDE DRIVE	
CITY-ST-ZIP	JAX FL	5.4 CITY-ST-ZIP	JACKSONVILLE FL 32244	
TITLE	D	6.1 TITLE	D	☒ Change ☐ Addition
NAME	ALLERHEILIGEN, AMY	6.2 NAME	TED TANIER	
STREET ADDRESS	7534 LEROY DR.	6.3 STREET ADDRESS	6803 LONDON BRIDGE LANE	
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP	JACKSONVILLE FL 32210	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 changed, or on an attachment with an address.

SIGNATURE: Richard Armstrong 1-27-95 904 573-1305
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

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