

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90124 045 ****61.25

DOCUMENT # N27209

1. Entity Name

NAVY JACKSONVILLE YACHT CLUB, INC.



Principal Place of Business

% COMMODORE

P.O. BOX 29

JACKSONVILLE FL 32212

Mailing Address

% COMMODORE

P.O. BOX 29

JACKSONVILLE FL 32212

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2896605**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

ARMSTRONG, RICHARD E
4055 PINTO RD N.
MIDDLEBURG FL 32068

7. Name and Address of New Registered Agent

Name **PATRICIA TANIER**

Street Address (P.O. Box Number is Not Acceptable)
750 Oak St Apt 401

City **JACKSONVILLE** FL Zip Code **32204**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Patricia Tanier*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-11-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **WOOD, BRUCE**
STREET ADDRESS **6067A ARROW COURT**
CITY-ST-ZIP **JACKSONVILLE FL 32212**

TITLE **VD** ☒ Delete
NAME **CURRIE, LYNNE**
STREET ADDRESS **1393 BELVEDERE AVENUE**
CITY-ST-ZIP **JACKSONVILLE FL 32205**

TITLE **DS** ☐ Delete
NAME **ALISHA EVANS, ALYNA KAI**
STREET ADDRESS **311 D. HAVEN AVE**
CITY-ST-ZIP **GREEN COVE SPRINGS FL 32043**

TITLE **DT** ☒ Delete
NAME **ARMSTRONG, RICHARD**
STREET ADDRESS **4055 PINTO RD**
CITY-ST-ZIP **MIDDLEBURG FL 32068**

TITLE **D** ☒ Delete
NAME **CURRIE, DARRYL**
STREET ADDRESS **1393 BELVEDERE AVENUE**
CITY-ST-ZIP **JACKSONVILLE FL 32205**

TITLE **D** ☒ Delete
NAME **WORTHINGTON, MICHAEL**
STREET ADDRESS **11088 BARIZON CIRCLE**
CITY-ST-ZIP **JACKSONVILLE FL 32057**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Change ☒ Addition
NAME **Richard Zarenba**
STREET ADDRESS **4903 Greenland Hideaway Dr N**
CITY-ST-ZIP **JACKSONVILLE FL 32258**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PT** ☐ Change ☒ Addition
NAME **Patricia Tanier**
STREET ADDRESS **PO Box 7128**
CITY-ST-ZIP **JACKSONVILLE FL 32238**

TITLE **D** ☐ Change ☒ Addition
NAME **George ALSTON**
STREET ADDRESS **4451 HERSCHEL ST**
CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE **D** ☐ Change ☒ Addition
NAME **STEVEN SPICKELMIER**
STREET ADDRESS **9088 South wack Dr.**
CITY-ST-ZIP **JACKSONVILLE FL 32257**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia Tanier*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

25 Feb 03 542-2179x42

CR2E037 (10/02)