

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20424

**Entity Name:** ST. GEORGE ISLAND CHARITY COOK-OFF AUCTION, INC.**Current Principal Place of Business:**60 EAST GULF BEACH DRIVE  
ST GEORGE ISLAND, FL 32328**Current Mailing Address:**P.O. BOX 920  
EASTPOINT, FL 32328 US**FEI Number:** 59-2915451**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAMBURG, JAYNE  
60 EAST GULF BEACH DRIVE  
ST GEORGE ISLAND  
EASTPOINT, FL 32328 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name BAMBURG, JAYNE Q  
Address 126 GULF COAST CIRCLE  
City-State-Zip: PORT ST. JOE FL 32456

Title VPD  
Name SHEPARD, GRAYSON  
Address PO BOX 704  
City-State-Zip: EASTPOINT FL 32328

Title TD  
Name LIPSCOMB, LATICIA F  
Address 153 LAS BRISAS DRIVE  
City-State-Zip: EASTPOINT FL 32328

Title D  
Name ABBOTT, JAY  
Address 419 NORTH SAWYER STREET  
City-State-Zip: ST GEORGE ISLAND FL 32328

Title SD  
Name LANDISS, KARA  
Address 624 WEST BAYSHORE DRIVE  
City-State-Zip: ST. GEORGE ISLAND FL 32328

Title D  
Name JACKEL, PINKI  
Address 301 WEST GORRIE DRIVE  
City-State-Zip: ST. GEORGE ISLAND FL 32328

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:** LATICIA F. LIPSCOMB

TD

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date