

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003746

Entity Name: FIRST COAST SHAG CLUB, INC.**Current Principal Place of Business:**5188 VILLAGE WAY
FERNANDINA BEACH, FL 32034**Current Mailing Address:**PO BOX 551424
JACKSONVILLE, FL 32255 US**FEI Number:** 59-3446698**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHAFFMAN, JIM
5188 VILLAGE WAY
FERNANDINA BEACH, FL 32034 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:** JIM CHAFFMAN

01/07/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LIBRANDI, JOHN B
Address 5252 TIERRA VERDE LANE
City-State-Zip: JACKSONVILLE FL 32258

Title VP
Name CHAFFMAN, JIM
Address 5188 VILLAGE WAY
City-State-Zip: FERNANDINA BEACH FL 32034

Title TREASURER
Name CAULDER, SANDRA
Address 8479 SPENCERS TRACE DR
City-State-Zip: JACKSONVILLE FL 32244

Title SECRETARY
Name LORRIE, DEFRANK
Address 13789 SEA MIST DRIVE
City-State-Zip: JACKSONVILLE FL 32224

Title D
Name AULTMAN, KATHI
Address 1469 WINFRED DR. E.
City-State-Zip: ORANGE PARK FL 32073

Title DIRECTOR
Name LUDWIG, JIMMY
Address 635 SPANISH WAY EAST
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name DOROUGH, BOB
Address 932 10TH STREET N.
 4535 WOODSONG LOOP EAST
City-State-Zip: JACKSONVILLE FL 32225

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: JIM CHAFFMAN

VICE PRESIDENT

01/07/2018

Electronic Signature of Signing Officer/Director Detail

Date