2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 191800

Apr 29, 2009 Secretary of State

Entity Name: SELVA MARINA COUNTRY CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

1600 SELVA MARINA DRIVE ATLANTIC BEACH, FL 32233

Current Mailing Address: New Mailing Address:

1600 SELVA MARINA DRIVE ATLANTIC BEACH, FL 32233

FEI Number: 59-6077224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIAZ, MIKE GIBBES, WILLIAM

1490 SELVA MARINA DR
ATLANTIC BEACH, FL 32233 US
1428 INDIAN WOODS DRIVE
NEPTUNE BEACH, FL 32266 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: WILLIAM R. GIBBES 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 DIAZ, MIKE
 Name:
 GIBBES, WILLIAM R

Address: 1490 SELVA MARINA DR Address: 1428 INDIAN WOODS DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233 City-St-Zip: NEPTUNE BEACH, FL 32266

Title: P () Delete Title: () Change () Addition

 Name:
 REDICK, RICK
 Name:

 Address:
 205 SOUTH FIRST STREET SUITE 6
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 City-St-Zip:

Name: STRONG, TIM Name: STRONG, TIM

 Address:
 2031 MARYE BRANT LOOP S
 Address:
 2031 MARYE BRANT LOOP S

 City-St-Zip:
 NEPTUNE BEACH, FL 32266
 City-St-Zip:
 NEPTUNE BEACH, FL 32266

Title: VP () Delete Title: S (X) Change () Addition

Name:GEESLIN, JÂMES MName:GEESLIN, JÂMES MAddress:226 OCEAN FOREST DR NAddress:226 OCEAN FOREST DR NCity-St-Zip:ATLANTIC BEACH, FL 32233City-St-Zip:ATLANTIC BEACH, FL 32233

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES GESLIN S 04/29/2009