

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703918

FILED
Feb 08, 2010
Secretary of State

Entity Name: ST JOHNS DINNER CLUB INC

Current Principal Place of Business:

17969 GREENWOOD AVE
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

17969 GREENWOOD AVE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-1022184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, WILLIAM E
1769 GREENWOOD AVE
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: CORDES, HENRY
Address: 2765 FIELDSTONE LANE
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP
Name: BRENNICK, BRUCE
Address: 1331 1ST ST. N. #901
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D
Name: SMITH, WILSON
Address: 13766 MANDARIN RD
City-St-Zip: JACKSONVILLE, FL 32223

Title: S
Name: GOWAN, VICTORIA
Address: 10436 HUNTERS CREEK COURT
City-St-Zip: JACKSONVILLE, FL 32256

Title: T
Name: JONES, WILLIAM E
Address: 1769 GREENWOOD AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: D
Name: BAKER, BARBARA
Address: 9461 WEXFORD RD.
City-St-Zip: JACKSONVILLE, FL 32257

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: WILLIAM E. JONES

T

02/08/2010

Electronic Signature of Signing Officer or Director

Date