

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

FILED
Feb 11, 2003 8:00 am
Secretary of State

02-11-2003 90071 043 ****61.25

DOCUMENT # 707083

1. Entity Name

JACKSONVILLE SHELL CLUB, INC.



Principal Place of Business

**2605 EMILY COURT
JACKSONVILLE FL 32216
US**

Mailing Address

**2605 EMILY COURT
JACKSONVILLE FL 32216
US**

90022858



2. Principal Place of Business

1010 N. 24th Street
Suite, Apt. #, etc.

3. Mailing Address

1010 N. 24th Street
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Jacksonville Beach FL

City & State

Jacksonville Beach, FL

4. FEI Number **59-1785008**

Applied For

Not Applicable

Zip

32250

Country

US

Zip

32250

Country

US

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ST. JOHN, TERESA M
2605 EMILY COURT
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name **Charlotte M. Lloyd**

Street Address (P.O. Box Number is Not Acceptable)

1010 N. 24th St.

City **Jacksonville Beach**

FL

Zip Code

32250

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

Charlotte M. Lloyd

Feb. 6, 2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 **SD** ☐ Delete
NAME **LEE, HARRY G**
STREET ADDRESS **1801 BARRS ST., SUITE 500**
CITY-ST-ZIP **JACKSONVILLE FL 32204**

TITLE **DT** ☒ Delete
NAME **ST. JOHN, TERESA M.**
STREET ADDRESS **2605 EMILY COURT**
CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **PD** ☐ Delete
NAME **NEWSOME, CLAIRE**
STREET ADDRESS **3875 COPPER CIR E**
CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **VD** ☐ Delete
NAME **RISHEL, CAROL**
STREET ADDRESS **2115 BEACH AVE**
CITY-ST-ZIP **ATLANTIC BEACH FL 32233**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **Treasurer - Director** ☒ Change ☐ Addition
NAME **Charlotte M. Lloyd**
STREET ADDRESS **1010 N. 24th St.**
CITY-ST-ZIP **Jacksonville Beach, FL 32250**

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

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

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:

Charlotte M. Lloyd

Feb. 6, 2003

904-246-0874

CR2E037 (10/02)