

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 14, 2008 8:00 am**  
**Secretary of State**

02-14-2008 90012 033 \*\*\*\*70.00

**DOCUMENT # 708507**

1. Entity Name

MCCORMICK MILE BEACH CLUB, INC.



Principal Place of Business

6900 N. OCEAN BLVD.  
OCEAN RIDGE FL 33435  
US

Mailing Address

79 ISLAND DR. S  
OCEAN RIDGE FL 33435  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

07-7248596

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEDLE, TED  
79 S ISLAND DR  
OCEAN RIDGE FL 33435

Name

CORRECT

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

79 Island Dr. South

City

CORRECT

FL

Zip Code

CORRECT

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

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

(NOTE: Registered Agent signature required)

DEPARTMENT OF STATE

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

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 VP ☒ Delete  
NAME JARVIS, DEBBIE  
STREET ADDRESS 101 BONITO DRIVE  
CITY- ST- ZIP OCEAN RIDGE FL 33435

TITLE 1T ☐ Delete  
NAME WEEGE, JAMES  
STREET ADDRESS 19 SABAL ISLAND DRIVE  
CITY- ST- ZIP OCEAN RIDGE FL 33435

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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 VP ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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

TITLE PD ☐ Change ☒ Addition  
NAME SIEDLE, EDWARD -  
STREET ADDRESS 79 ISLAND DR. SO.  
CITY- ST- ZIP OCEAN RIDGE, FL 33435

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

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

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 exemptions contained in Section 119, 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:

Edward Siedle 1-28-08

(561) 202-0919