

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719344

FILED  
Apr 02, 2008  
Secretary of State

Entity Name: PLAYERS BY THE SEA, INC.

**Current Principal Place of Business:**

106 6TH ST NORTH  
JACKSONVILLE BCH., FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

106 6TH ST. NORTH  
JACKSONVILLE BCH., FL 32250

**New Mailing Address:**

FEI Number: 23-7193645

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OAKLEY, NANCY  
54 OCEANSIDE DR.  
ATLANTIC BEACH, FL 32233 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: D ( ) Delete  
Name: LEJADD, MARY  
Address: 1317 NEPTUNE GROVE DR. W.  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: VP ( ) Delete  
Name: JARECKI, STEVE  
Address: 2291 OCEANSIDE COURT  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: T ( ) Delete  
Name: OAKLEY, NANCY  
Address: 54 OCEANSIDE DR.  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S ( ) Delete  
Name: GUTSHALL, HOLLY  
Address: 12863 DAYBREAD CT E  
City-St-Zip: JACKSONVILLE, FL 32246

Title: P ( ) Delete  
Name: LOWE, ROGER  
Address: 137 TENTH ST  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete  
Name: ATKINSON, RICHARD  
Address: 1504 BINKDALE LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DASHER, GWEN  
Address: 2601 ST. JOHNS BLVD.  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP (X) Change ( ) Addition  
Name: FEATHERINGILL, GAYLE  
Address: 1206 ARDEN WAY  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY H. OAKLEY

TREA

04/02/2008

Electronic Signature of Signing Officer or Director

Date