

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2009
Secretary of State

DOCUMENT# 719344

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: DASHER, GWEN
Address: 2601 ST. JOHNS BLVD.
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

03/06/2009

Electronic Signature of Signing Officer or Director

Date