

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724230

FILED
Mar 09, 2009
Secretary of State

Entity Name: TWO HUNDRED CLUB OF JACKSONVILLE, INC. THE

Current Principal Place of Business:

5531-B ROOSEVELT BLVD.
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14798
JACKSONVILLE, FL 32238

New Mailing Address:

FEI Number: 23-7190069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, MICHAEL R
ONE SAN JOSE PLACE, STE. 18
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

LAWRENCE, MICHAEL R
ONE SAN JOSE PLACE, STE. 18
JACKSONVILLE, FL 32257 US

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: MICHAEL R LAWRENCE

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LAWRENCE, MICHAEL R
Address: ONE SAN JOSE PLACE, STE 18
City-St-Zip: JACKSONVILLE, FL 32257

Title: P () Delete
Name: DAWKINS, CLINTON D III
Address: PO BOX 40706
City-St-Zip: JACKSONVILLE, FL 32203

Title: S () Delete
Name: PAVELKA, ROBERT F
Address: 4805 PRINCESS ANNE LN.
City-St-Zip: JACKSONVILLE, FL 32210

Title: T () Delete
Name: BENNETT, WALLACE M
Address: 5031 ORTEGA FOREST DR.
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAWRENCE, MICHAEL R
Address: ONE SAN JOSE PLACE, STE 18
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP (X) Change () Addition
Name: PAVELKA, ROBERT F
Address: 4805 PRINCESS ANNE LN.
City-St-Zip: JACKSONVILLE, FL 32210

Title: S (X) Change () Addition
Name: HAYNES, CALDWELL
Address: 751 OAK STREET, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32204

Title: T (X) Change () Addition
Name: FARNELL, CLEVELAND T
Address: 4900 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

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: MICHAEL R. LAWRENCE

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date