

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727705

FILED
Mar 25, 2008
Secretary of State

Entity Name: MENINAK CLUB OF JACKSONVILLE, INC.

Current Principal Place of Business:

5932 CARIBBEAN CRT N.
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 8626
JACKSONVILLE, FL 32239 US

New Mailing Address:

FEI Number: 59-1493308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILL, CATHERINE M ED
5932 CARIBBEAN CRT N.
JACKSONVILLE, FL 32277 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: P () Delete
Name: LANIER, JANE R
Address: 4835 BEEFEATERS ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: S () Delete
Name: TUTTLE, DAVE
Address: 10587 LAKE HOLLOW LANE
City-St-Zip: JACKSONVILLE, FL 32257

Title: T () Delete
Name: LAMPP, DAVID L
Address: 11730 SPARKLEBERRY LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: HAND, MARK S
Address: 12611 MISSION HILLS CIRCLE N
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: NEWCOMER, HENRY C
Address: 532 RUTILE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: COBB, LARRY
Address: 4211 STRATFORD WAY
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONYERS, HARRISON E III
Address: 4840 PRINCESS ANN LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: S (X) Change () Addition
Name: LOVE, JAMES M
Address: 1740 S. EDGEWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

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

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

Title: D (X) Change () Addition
Name: COUSINS, WILLIAM R
Address: 3802 REEDPOND DRIVE S.
City-St-Zip: JACKSONVILLE, FL 32223

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: HARRISON E. CONYERS III

P

03/25/2008

Electronic Signature of Signing Officer or Director

Date