

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2008 8:00 am
Secretary of State

07-07-2008 90001 020 ****61.25

DOCUMENT # 750729

1. Entity Name
PLAYGROUND GEM AND MINERAL SOCIETY, INC.



Principal Place of Business
**17 1ST STREET
FORT WALTON BEACH, FL 32548 US**

Mailing Address
**17-B FIRST STREET S.E.
FORT WALTON BEACH, FL 32548 US**

40109570



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05292008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1940286

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**REIKO CHAFIN
1004 BEACHVIEW DR.
FORT WALTON BEACH, FL 32547**

Name

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

City

FL

Zip Code

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 *Reiko Chafin*

Reiko Chafin

6-23-08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 12, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BAGGET, JANET
312 BROOKS ST
FORT WALTON BEACH, FL 32548** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Phillips, Sharon
9 Bayview Dr
Shalimar FL 32579** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
WESTON, AL
701 OVERBROOK DR
FORT WALTON BEACH, FL 32547** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
Chafin, Reiko
1004 Beachview Dr
Ft. Walton Bch FL 32547** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JONES, KEIKO
207 PAWNEE CIR
FORT WALTON BEACH, FL 32547** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1st VP
Engler, Dale
24 Pryor Rd S.E.
Ft. Walton Bch FL 32548** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SIMAY, MARJORI
9 MARY ESTHER DR
MARY ESTHER, FL 32569** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2nd VP
Phillips, Thelma
9 Bayview Dr
Shalimar FL 32579** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FLORES, VINCENT
218 BRADLEY DR.
FORT WALTON BEACH, FL 32548** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Director
Bergquist, David
2500 Edgewater Dr
Nikeville FL 32578** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROWLEY, LESTER
326 LINCOLN AVE
VALPARAISO, FL 32580** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Director
Wright, George
677 Bernwick Circle
Shalimar FL 32579** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Sharon L. Phillips* *Sharon L. Phillips*

23 June 2008

850-657-0508

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #