

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90255 038 ****61.25

DOCUMENT # 751240

1. Entity Name

SCHOONER POINT MANAGEMENT, INC.



Principal Place of Business

4801 SAXON DRIVE
NEW SMYRNA BEACH FL 32069

Mailing Address

4801 SAXON DRIVE
NEW SMYRNA BEACH FL 32069

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2060752

Applied For

Not Applicable

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

DAVIS, JOHN
4801 SAXON DR
NEW SMYRNA BEACH FL 32169

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE SD ☒ Delete
NAME STOCKTON, JIM
STREET ADDRESS 4801 SAXON DR
CITY-ST-ZIP NEW SMYRNA BCH FL 32169

TITLE P ☐ Delete
NAME LAMPKE, ROBERT H
STREET ADDRESS 4801 SAXON DR
CITY-ST-ZIP NEW SMYRNA BCH FL 32169

TITLE VD ☐ Delete
NAME GRISWOLD, JOE
STREET ADDRESS 4801 SAXON DR
CITY-ST-ZIP NEW SMYRNA BCH FL 32169

TITLE D ☐ Delete
NAME GALANES, JAMES G
STREET ADDRESS 4801 SAXON DR
CITY-ST-ZIP NEW SMYRNA BCH FL 32169

TITLE TD ☐ Delete
NAME DAVIS, JOHN
STREET ADDRESS 4801 SAXON DR
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Change ☒ Addition
NAME MADIGAN, CHAMP
STREET ADDRESS 4801 SAXON DR
CITY-ST-ZIP NEW SMYRNA BCH, FL 32169

TITLE VD ☒ Change ☐ Addition
NAME LAMPKE, ROBERT H.

TITLE TD ☒ Change ☐ Addition
NAME GRISWOLD, JOE

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Change ☐ Addition
NAME DAVIS, JOHN

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *John H. Davis - John E. Ditus - Pres* 3-17-06