

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757400

FILED  
May 10, 2010  
Secretary of State

**Entity Name:** JOHN'S PASS VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

150 JOHN'S PASS BOARDWALK  
MADEIRA BEACH, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

150 JOHN'S PASS BOARDWALK  
MADEIRA BEACH, FL 33708

**New Mailing Address:**

**FEI Number:** 06-1638836      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

HUBBARD, PATRICIA  
150 JOHN'S PASS BOARDWALK  
MADEIRA BEACH, FL 33708      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** TABOLT, MARK  
**Address:** 150 JOHN'S PASS BOARDWALK  
**City-St-Zip:** MADEIRA BEACH, FL 33708

**Title:** D  
**Name:** MATT, POWERS  
**Address:** 150 JOHN PASS BOARDWALK  
**City-St-Zip:** MADEIRA BEACH, FL 33708

**Title:** DT  
**Name:** HUBBARD, PATRICIA  
**Address:** 150 JOHN'S PASS BOARDWALK  
**City-St-Zip:** MADEIRA BEACH, FL 33708

**Title:** D  
**Name:** HUBBARD, MARK  
**Address:** 150 JOHN'S PASS BOARDWALK  
**City-St-Zip:** MADEIRA BEACH, FL 33708

**Title:** DS  
**Name:** MEYER, CHRIS  
**Address:** 150 JOHN'S PASS BOARDWALK  
**City-St-Zip:** MADEIRA BEACH, FL 33708

**Title:** D  
**Name:** MCDOLE, KATHLEEN  
**Address:** 150 128TH AVENUE  
**City-St-Zip:** MADEIRA BEACH, FL

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA HUBBARD

DT

05/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date