

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763992

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: AMELIA ISLAND SAILING CLUB, INCORPORATED

## Current Principal Place of Business:

P.O. BOX 1363  
FERNANDINA BCH, FL 32034

## New Principal Place of Business:

4614 GLYN WOODS CT.  
FERNANDINA BCH, FL 32034 US

## Current Mailing Address:

P.O. BOX 1363  
FERNANDINA BCH, FL 32034

## New Mailing Address:

P.O. BOX 1363  
FERNANDINA BCH, FL 32034 US

FEI Number: 59-2804571

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASON, THOMAS T  
8678 RIVER WOOD DR  
YULEE, FL 32097 US

## Name and Address of New Registered Agent:

GEAGON, JOSEPH F T  
4614 GLYN WOODS CT.  
FERNANDINA BEACH, FL 32034 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: JOSEPH F. GEAGON

01/22/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: MASON, THOMAS  
Address: 8678 RIVERWOOD DR  
City-St-Zip: YULEE, FL 32097

Title: C ( ) Delete  
Name: BLANCHARD, JOE  
Address: 1008 NATURES WALK DRIVE UNIT 13  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: RC (X) Delete  
Name: MASON, GEORGE  
Address: HECKSHER DR.  
City-St-Zip: JACKSONVILLE, FL

Title: VC (X) Delete  
Name: STEINKAMP, CHARLES  
Address: 1642 PLANTAITON OAKS LANE  
City-St-Zip: FERNANDINA BEACH, FL 32034

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: GEAGON, JOSEPH F T  
Address: 4614 GLYN WOODS CT.  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: C (X) Change ( ) Addition  
Name: STEINKAMP, CHARLES C  
Address: 1246 PLANTATION OAKS LANE  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

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

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: JOSEPH F. GEAGON

T

01/22/2009

Electronic Signature of Signing Officer or Director

Date