


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90142 022 ***150.00

DOCUMENT # M80412 1. Entity Name QUEEN'S HARBOUR YACHT & COUNTRY CLUB, INC.	
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Principal Place of Business 13361 ATLANTIC BLVD. JACKSONVILLE, FL 32225	Mailing Address 13361 ATLANTIC BLVD. JACKSONVILLE, FL 32225
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2. Principal Place of Business - No P.O. Box # S 700 Ponte Vedra Lakes Blvd. C Ponte Vedra Beach, FL 32082	3. Mailing Address 700 Ponte Vedra Lakes Blvd. Ponte Vedra Beach, FL 32082
Zip Country	Zip Country

	
01172008 Chg-P	CR2E034 (12/06)
4. FEI Number 59-2942729	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MORRIS, GREGORY D 2325 ULMERTON RD STE 20 CLEARWATER, FL 33762	
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7. Name and Address of New Registered Agent Name S 700 Ponte Vedra Lakes Blvd. Ponte Vedra Beach, FL 32082-1260 City FL Zip Code	
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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 <u><i>Mr. Morris Gregory D Morris</i></u> DATE <u>4/22/08</u> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORRIS, GREGORY D 2325 ULMERTON RD STE 20 CLEARWATER, FL 33762 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 700 Ponte Vedra Lakes Blvd. Ponte Vedra Beach, FL 32082-1260
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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.	
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SIGNATURE: <u><i>Mr. Morris Gregory D. Morris</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>2/06/08</u> <small>Date</small>	<u>727-576-6424</u> <small>Daytime Phone #</small>
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